

State of Missouri

2007 State Services to Victims Fund (SSVF) Grant

**Request for Proposal
Application Packet**

Missouri Department of Public Safety
Office of the Director
PO Box 749
Jefferson City, MO 65102-0749

DEADLINE:

**The original application and 2 copies must be received by the
Missouri Department of Public Safety by 4:30 p.m. Friday, April 7,
2006 or postmarked by April 7, 2006
(See filing instructions for complete instructions)**

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PROGRAM DESCRIPTION

STATE SERVICES TO VICTIMS FUND

Program Description

State Services To Victims Funds

INTRODUCTION

The State's initial victim assistance program was established by the Missouri General Assembly under the auspices of the Department of Public Safety with the adoption of Section 595.050, RSMo in 1981. With the passage of Section 595.100, RSMo (1988), the Services to Victims Fund was established. The Services to Victims Fund consists of money collected pursuant to section 595.045, RSMo. Upon appropriation, this money shall be used solely for the administration of contracts for services to victims of crime pursuant to sections 595.050, 595.055, and 595.105, RSMo.

SOURCE OF FUNDS

The actual amount and availability of funds for the State Services to Victims Fund depends upon the appropriations provided by the General Assembly for each fiscal year and upon the amount of monies collected and deposited into the State Services to Victims Fund established under section 595.100, RSMo. The source of the monies collected for the State Services to Victims Fund is a court cost assessed in any court in the state (including juvenile court) for violation of a criminal law of the state including an infraction and violation of a municipal or county ordinance.

Out of the funds collected, \$250,000 is allocated for the state forensic laboratories; in addition there is an annual appropriation for the Missouri Office for Victims of Crime and the maintenance of a victim notification system (MoVANS – Missouri Victim Automated Notification System). Beginning on September 1, 2004, and on the first of each month, the director of revenue or the director's designee shall deposit fifty (50) percent of the balance of funds available to the credit to the crime victims' compensation fund and fifty (50) percent to the services to victims' fund established in section 595.100.

DEFINITIONS

Services to Victims Program refers to the program created by section 595.050, RSMo and administered by the Department of Public Safety for the purpose of establishing victim assistance programs.

Cash Contribution - refers to funds in the form of cash available from local funding sources other than the Services to Victims Program, other state programs, or federal funding programs.

In-kind Contribution – refers to non-monetary contributions and donations received from individuals, agencies, associations, organizations, etc. by the applicant agency.

Supplanting - refers to using funds received through the State Services to Victims Fund to replace funds that would normally be available if state funds are not received. Therefore, State Services to Victims Funds cannot be used for existing costs, because those costs have been paid previously by other funding. However, if an agency can substantiate that funding has been lost, (for example an agency received \$10,000 in United Way funding during the past year and this year will only be receiving \$5,000) State Services to Victims funds could be requested to cover costs up to the amount lost. The limited state funds are not intended to replace local funds or other state and federal funds. **Supplanting no longer applies to not-for-profit agencies applying for SSVF grant funds; HOWEVER, if a not-for-profit agency is requesting SSVF grant funds to replace existing agency or other sources of funding, the agency needs to provide an explanation as to why SSVF grant funds are needed to replace agency or other funds used for the same purpose in the past.**

For the purposes of administering the Services to Victims Program, the Department of Public Safety will use the legal definition of terms contained in section 595.010, RSMo. These definitions are as follows:

- **Crime** - an act committed in this state which, if committed by a mentally competent, criminally responsible person who had no legal exemption or defense, would constitute a crime; provided that, such act involves the application of force or violence or the threat of force or violence by the offender upon the victim but shall include the crime of driving while intoxicated and vehicular manslaughter and hit and run; and provided, further, that no act involving operation of a motor vehicle except driving while intoxicated and vehicular manslaughter which results in injury to another shall constitute a crime for the purpose of sections 595.010 to 595.075, unless such injury was intentionally inflicted through the use of a motor vehicle. A crime shall also include an act of terrorism, as defined in 18 U.S.C. section 2331, which has been committed outside of the United States against a resident of Missouri;
- **Crisis Intervention Counseling** - helping to reduce psychological trauma where victimization occurs;
- **Department** - Department of Public Safety;
- **Dependent** - mother, father, spouse, spouse's mother, spouse's father, child, grandchild, adopted child, illegitimate child, niece or nephew, who is wholly or partially dependent for support upon, and living with, but shall include children entitled to child support, but not living with, the victim at the time of his injury or death due to a crime alleged in a claim pursuant to sections 595.010 to 595.070;
- **Direct Service** - providing physical services to a victim of crime including, but not limited to, transportation, funeral arrangements, childcare, emergency food, clothing, shelter, notification and information;
- **Director** - the director of the Missouri Department of Public Safety or a person designated by him for the purposes of sections 595.010-070;
- **Division** - the Division of Workers' Compensation of the state of Missouri;
- **Emergency Service** - those services provided within thirty days to alleviate the immediate effects of the criminal act or offense, and may include cash grants of not more than one hundred dollars;
- **Family** - the spouse, parent, grandparent, stepmother, stepfather, child, grandchild, brother, sister, half brother, half sister, adopted children of parent, or spouse's parents of the victim;
- **Hit and Run** – the crime of leaving the scene of a motor vehicle accident as defined in section 577.060, RSMo;
- **Injured Victim** - shall mean a person:
 - Killed or receiving a personal injury in this state as a result of another person's commission of or attempt to commit any crime;
 - Killed or receiving a personal injury in this state while in a good faith attempt to assist a person against whom a crime is being perpetrated or attempted;
 - Killed or receiving a personal injury in this state while assisting a law enforcement officer in the apprehension of a person who the officer has reason to believe has perpetrated or attempted a crime.
- **Offender** - a person who commits a crime;

- **Personal Injury** - actual bodily harm only with respect to the victim; personal physical injury may include mental or nervous shock resulting from the specific incident upon which the claim is based;
- **Private Agency** - a not-for-profit corporation, in good standing in this state, which provides services to victims of crime and their dependents;
- **Public Agency** - a part of any local or state government organization that provides services to victims of crime;
- **Relative** – the spouse of the victim or a person related to the victim within the third degree of consanguinity or affinity as calculated according to civil law;
- **Survivor** – the spouse, parent, legal guardian, grandparent, sibling or child of the deceased victim of the victim’s household at the time of the crime.
- **Victim** - a person who suffers personal injury or death as a direct result of a crime, as defined above in this section.
- **Victim Advocacy** - assisting the victim of crime and his/her dependents to acquire services from existing community resources.

ELIGIBLE SUBGRANTEE ORGANIZATIONS

As stated in section 595.050, RSMo, public and not-for-profit private agencies are eligible to apply for funds available through the Services to Victims Program. Public, governmental agencies may not receive Services to Victims Program funds to supplant existing funds that are presently being used to provide assistance to victims of crime. Services to Victims funds are intended to start new programs or to expand/enhance existing programs. In addition, non-profit agencies must have a 501(c)(3) status to be eligible to receive funds.

In addition to victim services organizations whose sole purpose is to serve crime victims, there are many other public agencies and not-for-profit organizations that have components which offer services to crime victims. These organizations are eligible to receive SSVF grant funds, if the funds are used to expand or enhance the delivery of crime victim’s services. These organizations include, but are not limited to:

1. **Criminal Justice Agencies.** Such agencies as law enforcement organizations, prosecutors’ offices, court, and corrections departments are eligible to receive SSVF grant funds to help pay for victim services. In general, SSVF grant funds may be used to provide crime victim services that exceed a law enforcement official’s normal duties. Regular law enforcement duties such as crime scene intervention, questioning of victims and witnesses, investigation of the crime, and follow-up activities may not be paid for with SSVF grant funds.
2. **Religiously Affiliated Organizations.** Such organizations receiving SSVF grant funds must ensure that services are offered to all crime victims without regard to religious affiliation and that the receipt of services is not contingent upon participation in a religious activity or event.
3. **Others.** State and local public agencies such as hospitals and emergency medical facilities, mental health service organizations, state/local public child and adult protective services, state grantees, legal services agencies and public housing authorities that have components specifically trained to serve crime victims.

ELIGIBILITY REQUIREMENTS

1. The public or not-for-profit private agency receiving assistance from the Services to Victims Fund will be responsible for the development and implementation of a record-keeping system based on the following criteria to verify the eligibility of victims of crime and/or their dependents to receive services:
 - a. The crime must have been committed in Missouri, or the crime victim must be a resident of Missouri;
 - b. The crime must have involved the threat or the use of force or violence in its commission;
 - c. The crime must have been reported to an appropriate law enforcement office within forty-eight (48) hours after the victim of the crime, a dependent or a member of the family of the victim could reasonably be expected to make a report;
 - d. The victim of the crime cannot be the perpetrator or a principal or accessory involved in the commission of the crime for which he otherwise would have been eligible for assistance under the State Services to Victims Program.
 - e. Injuries sustained by the victim of crime cannot be a result of the operation of a motor vehicle, boat or airplane unless the same was used as a weapon in a deliberate attempt to inflict personal injury upon any person or unless the victim was injured as a result of the crime of driving while intoxicated, vehicular manslaughter or hit and run.
2. Subrecipients must provide services to victims through the State Services to Victims funded program free of charge.
3. The applicant agency is encouraged to include provisions to assist crime victims in seeking available crime victim compensation benefits by coordinating its activities with the state compensation program that is operated by the Division of Workers' Compensation. The telephone number for the State Crime Victims' Compensation Office is (573) 526-6006 or 1-800-347-6881.
4. The applicant agency must also promote, within the community served, coordinated public and private efforts to aid crime victims so that the best interests of the crime victims are served and interagency communication is enhanced.

ALLOWABLE SERVICES, ACTIVITIES, & COSTS

1. **Allowable Costs for Direct Services.** Allowable services include direct services to victims of crime and training for staff and volunteers in the area of direct services. The following is a list of services for which the State Services to Victims Program funds may be used.
 - a. **Services** which immediately respond to the urgent emotional and/or physical needs of crime victims such as **crisis intervention; accompaniment to hospitals for medical examinations; hotline intervention; emergency clothing, transportation and shelter; emergency legal assistance;** and other emergency services that are intended to restore the victim's sense of dignity, self-esteem, and coping mechanisms.
 - b. **Services** and activities that assist the victims of crime in understanding the dynamics of victimization and in stabilizing their lives such as **follow-up counseling, group treatment, therapy, etc.**
 - c. **Services** directed to the needs of the victims (not witnesses) within the criminal justice system or process (but not directed to the needs of the criminal justice system). These services may include

criminal justice support and court related services such as accompaniment to law enforcement offices, court, etc.; transportation to court; childcare while in court; trial notification and case disposition information; restitution advocacy; assistance with victim impact statements; and parole notification.

**Please note, a prosecution-based victim assistance unit must provide those eligible services included in the Constitutional Amendment for Victims Rights as outlined in Section 595.209, RSMo. (Services directed to witnesses, who are not victims of crime, are not eligible for services.)*

- d. **Services** that offer an immediate measure of safety to crime victims such as **preventing the immediate re-burglarization** by boarding-up windows, replacing or repairing locks, etc.
- e. **Services** which assist crime victims with managing practical problems created by the victimization such as **acting on behalf of the victim to intervene with other service providers, creditors, or employers; assisting the victim to recover property that is retained as evidence; assistance in filing for compensation benefits; helping to apply for public assistance; managing the overall service and informational needs on behalf of the crime victim until such time that the victim can assume these responsibilities; etc.**
- f. **Training** - This service shall include training programs that improve the service skills of persons who provide direct services to crime victims. Training that does not pertain to providing direct services to victims of crime is not an allowable cost and cannot be attended by grant funded personnel on grant time.
- g. **Printing and Distribution/Public Notification** - This service includes brochures and similar announcements describing the direct services available and how to obtain a program's assistance, and similar public notification efforts intended to recruit volunteers.
- h. **Other** - Other direct services to victims of crimes not specifically mentioned previously may be provided, and eligibility will be considered.

2. Eligible Cost Items. The state funds shall be utilized only for the following allowable cost items.

- a. **Travel** - Transportation costs for victim assistance related activities for victims of crime, local travel expenses for direct services providers, and reasonable and necessary travel costs related to staff participation in eligible training programs. Travel costs are provided on a reimbursement basis and must be documented by mileage logs or voucher logs/receipts.
- b. **Personnel** - Salaries of staff to coordinate delivery of the State Services to Victims Fund project or to provide direct services to eligible victims of crime. Unless otherwise stated, most fringe benefits are also eligible. All SSVF staff must keep detail time sheets supporting 100% of their time regardless of how much time is spent on SSVF activities.
- c. **Equipment** - Equipment necessary to provide direct services to victims such as computers, printers, copiers, etc. If the equipment is not used solely for this program the costs associated with the equipment must be prorated for the SSVF grant program. For instance, if the SSVF program accounts for 10% of the agency's overall budget then 10% of the cost of a copier may be attributed to the SSVF grant.
- d. **Supplies/Operating Expenses** - Expenses necessary to the operation of the program such as rent, utilities, telephone, Internet, brochures which describe available services, books and other victim-related materials, printing, postage, supplies, etc. which are directly attributable to the performance of direct services to victims of crime. *These costs must be pro-rated based on the direct services offered. State Services to Victims Program funds cannot be utilized for administrative and overhead costs.*

Office Supplies- The following list constitutes “office supplies” for the purposes of this grant. Any item not specifically listed cannot be claimed in the general “office supplies” line item in your budget and must be listed as a separate line item in your budget. The “Office supplies” as indicated below must be specifically for this project or otherwise prorated for this project. The entire list does not need to be shown on the budget page only “office supplies” need be shown.

Office Supplies – pens, pencils, markers, highlighters, paper, letterhead, envelopes, paper clips, rubber bands, stapler, staples, rolodex, rolodex cards, scissors, note pad, telephone log, calendar, tape, tape dispenser, memo pad, post-it notes, white out, typewriter ribbon, print cartridges, correction tape, ruler, file folders, letter opener, hole punch, paper cutter, labels, dictionary, bulletin board, push pins, glue, blank tapes, blank floppy discs and blank cd’s, pencil/supplies holder, adding machine tape, toner, business cards, phone cord, printer/computer cable, key tags, padlocks for cabinets, filing cart, index cards, notebook dividers, binder clips, ink-stamp, batteries for pagers, file box. ***Any other item must be specifically requested and approved by DPS and designated as a separate line item.***

- e. **Contractual Expenses** – SSVF funds generally should not be used to support contract services. At times, however, it may be necessary for SSVF subgrantees to use a portion of the SSVF grant to contract for specialized services. Examples of these services include assistance in filing restraining orders; emergency psychological or psychiatric services; or sign and / or interpretation for the hearing impaired/deaf or for crime victims whose primary language is not English. Contractual expenses must be supported with documentation of time spent on eligible activities and the reimbursement for that time.
- f. **Audit Cost** - Only a prorated share of the audit cost that is required as a result of receiving this funding is allowable (Agencies receiving over \$100,000 in State funds are required to have an audit conducted).
- g. **Emergency Legal Services** - Only those legal services that include the filing of elder abuse petitions, child abuse petitions, and temporary restraining orders are allowable.

INELIGIBLE SERVICES

The applicant may not conduct the following activities that are unrelated or only tangentially related to the provision of direct services to victims of crime: (This list may not be all- inclusive.):

- **Lobbying** and administrative advocacy for victim legislation or administrative reform, whether conducted directly or indirectly. **(NOT ALLOWABLE)**
- **General Criminal Justice Agency Improvements** or programs where crime victims are not sole or primary beneficiaries. **(NOT ALLOWABLE)**
- **Witness Management** or notification programs. Victim/Witness assistance programs that provide both victim services and witness notification services may receive funding support only for that portion of the program that provides direct services to crime victims. **(NOT ALLOWABLE)**
- **Needs Assessments**, surveys, evaluations, studies, and research efforts conducted by individuals, organizations, task forces, special commissions, etc., which study and/or research a particular victim issue. **(NOT ALLOWABLE)**

- **Management Training** aimed at persons who do not provide direct services to crime victims. **(NOT ALLOWABLE)**
- **Criminal Justice Activities** aimed at prosecuting an offender and/or improving the criminal justice system's effectiveness and efficiency such as witness notification and management activities; expert testimony at a trial; victim/witness expenses such as travel to testify in court and subsequent lodging and meal expenses; victim protection costs; etc., which are considered the criminal justice agency's responsibility. **(NOT ALLOWABLE)**
- **Fundraising Activities**, to include attending pre-bid seminars and grant writing activities. **(NOT ALLOWABLE)**
- **Nursing Home Care**, home health-care costs, inpatient treatment, hospital care, and other types of emergency and non-emergency medical and/or dental treatment. State Services to Victim Program funds cannot support medical costs regardless of whether or not these costs are a result of victimization. **(NOT ALLOWABLE)**
- **Administrative Duties**, i.e., accounting, supervisory duties, upper management responsibilities, etc. **(NOT ALLOWABLE)**
- **Crime Prevention Programs** and other activities intended to educate the community on the prevention of crime and to raise the public's consciousness regarding crime. **(NOT ALLOWABLE)**
- **Perpetrator Rehabilitation** and counseling. Sub recipients cannot use State Services to Victims Program funds to offer rehabilitative services to offenders. State Services to Victims Program funds cannot support services to incarcerated individuals, even when the service pertains to the victimization of that individual. **(NOT ALLOWABLE)**

INELIGIBLE COST ITEMS

State funds shall not be utilized for the following cost items. *(This list may not be all-inclusive.):*

- **Construction** or renovation costs. **(INELIGIBLE)**
- **Acquisition Cost** of real estate property. **(INELIGIBLE)**
- **Indirect Organizational Costs** such as liability insurance on buildings and vehicles; capital improvements; security guards and body guards; property losses and expenses; real estate purchases; mortgage payments; construction costs; salaries of management staff; accounting services; etc. **(INELIGIBLE)**
- **Large Items of Equipment** including, but not limited to, vehicles, security systems, etc. **(INELIGIBLE)**
- **Salaries**, fees, and reimbursable expenses associated with *administrators*, board members, executive directors, consultants, coordinators, and others unless, and to the extent that, these expenses are incurred while providing direct services to crime victims or providing training and/or technical assistance through an approved State Services to Victims Fund project. **(INELIGIBLE)**
- **The Salary** or expenses of any applicant, or agent acting for the applicant, to engage in any activity designed to *influence legislation* or appropriations pending before the Missouri General Assembly or United States Congress. **(INELIGIBLE)**
- **Vehicles** purchased or leased. **(INELIGIBLE)**
- **Relocation Expenses** such as moving expenses, security deposits on housing, ongoing rent, mortgage payments; however, funds may be used to support staff time in locating resources to assist victims with these expenses. **(INELIGIBLE)**
- **Professional Dues**, subscriptions, and memberships. **(INELIGIBLE)**

- **Property Loss** such as reimbursing the victims for insurance deductibles, replacing stolen property, paying funeral expenses, lost wages, and medical bills. **(INELIGIBLE)**
- **Employee bonuses (INELIGIBLE)**

CONFIDENTIALITY

Information related to the provision of services under this program must be kept in strict confidence. Other than the reports submitted to the Department of Public Safety, Office of the Director, the applicant cannot publish, reproduce, or otherwise divulge such information unless prior approval is received from the Department of Public Safety, Office of the Director. Applicants shall take such reasonable measures as are necessary to restrict access to information in their possession, to those employees who must have the information on a "need-to-know" basis, and the applicant agrees to notify, in writing, the Department of Public Safety, Office of the Director, should a breach to this requirement be suspected or determined. Nothing in this requirement shall be construed to seek a breach of client confidentiality as now exists between client and counselor except as mandated by the laws of the State of Missouri, i.e., Child Abuse Hotline.

CONTRACT PERIOD

The contract period for approved projects is July 1st through June 30th.

MONITORING

All contracts funded will be monitored as deemed necessary by the Victim Services Grant Program Office Program Manager. Agencies may be monitored annually through either an on-site monitoring visit or through "desk-top" monitoring.

Nothing in this guideline precludes the Department of Public Safety from conducting a site-visit or desk monitoring more often than once per year. In certain situations, a contract may be monitored either on-site or through desk monitoring on a regular and frequent basis to assure compliance. These situations include, but are not limited to:

- A report to the Department of Public Safety of the mishandling of grant funds;
- A report of the use of grant funds for ineligible activities;
- Discrepancies noted on the Monthly Report of Expenditures and/or Detail Sheet;
- A change in the managing staff within a contracting agency;
- Financial and/or programmatic issues of noncompliance found during a regularly scheduled monitoring visit or desk monitoring.

Grant Application Instructions

Grant Application Instructions

All portions of the *SSVF Grant Application* shall be completed and submitted for funding consideration. **The *SSVF Grant Application* forms and narrative must be typewritten.**

APPLICATION FORMS - INSTRUCTIONS

APPLICATION SUMMARY REPORT FORM

While this is the first page of your completed application packet, this should be the last form you complete. You will provide identifying information pertaining to the Authorized Official, Project Director and the Grant Contact Person and other project related data. The Grant Contact Person should be the individual who is most familiar with the program this grant will fund. This person can be the Project Director if that individual is most familiar with the program.

You must also include a summary of your project based upon the information provided in the narrative work program submitted with the application. By completing this form after completing the rest of the proposal you will have a clearer idea of what to say in order to summarize the project. Make sure the summary is absolutely clear and to the point.

APPLICATION FOR FUNDING FORM

Complete the *APPLICATION FOR FUNDING* form using the instruction page included in the *Application Forms* section of this application.

- Be sure to complete the entire form.
- The address for the Authorized Official should not be the same address as the Project Director unless they both occupy workspace at the same location.
- When completing Section 16 – Budget please make sure the dollar amounts shown for each budget category match the amounts shown on each budget page submitted.
- An original signature of the Authorized Official must be provided.

BUDGET FORMS

General Instructions

- Included in this application packet are budget forms for *PERSONNEL*, *TRAVEL*, *EQUIPMENT*, *SUPPLIES/OPERATIONS*, and *CONTRACTUAL* categories. Submit only the appropriate budget forms for which you are seeking funding.
- Provide a complete breakdown of the budget for implementation and operation of the proposed project on the appropriate budget forms. Instructions for completing the budget forms are printed at the top of each form. Please be sure to follow these instructions precisely. Examples of completed forms are included with the blank forms. Refer to the *Program Description* and *Financial and Administrative Guidelines for Contracts* for information on the use of funds.
- Submit the completed budget forms with the application. If you are not requesting funding on a particular budget form, you do not need to include that form with the application. Show “\$0” for that budget category on the *APPLICATION FOR FUNDING* Form.
- Once the budget forms are completed, transfer the total of each budget form to the *APPLICATION FOR FUNDING* form.

Personnel Budget Form

- The actual gross monthly salary of individuals must be shown in the “Salary per Month” column on the Personnel budget page.

Advocate A receives a gross monthly salary of \$2,000.00 for a total yearly salary of \$24,000. SSVF covers \$12,000 of Advocate A’s salary and agency funds cover the remaining \$12,000. On the personnel budget page under the “Salary per Month” column you would enter \$2,000. The percentage of time on the grant is 50% (since SSVF is paying half of Advocate A’s salary) and the months to be employed would be 12. The total cost for Advocate A is \$12,000 ($\$2,400 * 50\% * 12$). The percentage of time on the grant refers to the amount of an individual’s time funded by SSVF.

The percentage of time for a part-time employee who spends all of his/her time on grant activities and whose entire salary would be funded by SSVF should be shown as 100%.

- Fringe benefits must be itemized on the Personnel budget page. Medical, dental and vision insurance premiums should be shown as separate line items unless they are all included in the same premium and are not itemized. Personnel funded through City and County Governments are employees of the City or County and should receive the same benefits/pay as other similar employees in the City/County Government.
- **If an individual’s time is not 100% eligible through the grant, the fringe benefits must also be prorated based upon the percentage of time spent on the grant.**
- Detailed time and attendance records shall support all personnel costs and that proper records shall be maintained to adequately substantiate time spent to carry out the specific objectives for which the contract was approved. All SSVF funded employees must keep a timesheet of all activities to document time spent on the project. Only actual time spent on the project may be claimed. The timesheets must include the date, the beginning time, a brief description of, and the ending time for each task performed by the employee.
- Job descriptions outlining the job duties and minimum applicant requirements must be provided for each position shown on the Personnel Budget Form. The job descriptions must detail at a minimum the requirements/qualifications for the position and the duties/activities of the position.

Travel Budget Form

- Mileage for the 2007 SSVF contract should be figured at no more than \$0.415 per mile. This amount is the approved mileage rate for the State of Missouri.

If your agency’s mileage reimbursement is LESS than the approved State rate, you are required to use your agency’s reimbursement amount. If your agency’s mileage reimbursement rate is MORE than the State rate you are required to use the State of Missouri’s reimbursement rate.

- Travel expenses for conferences and training should be itemized on the travel budget page:
 - Registration costs are not considered travel expenses and should be listed on the Supplies/Operations budget page.
 - Airfare, parking costs, shuttle/transportation costs, etc., should be listed as separate line items by training/conference
 - Local travel costs for transporting victims should be shown separate from other transportation costs.

- Reimbursement for meals may be shown as a per diem rate, but only **actual** expenses can be claimed and reimbursed.
- Receipts must be available for reconciliation if funds are awarded and reimbursed.
- Costs associated with travel are not reimbursed until after the travel/training has occurred.
- The titles, sponsors, dates and locations of training, seminars and conferences not specifically outlined in the approved budget must be submitted to the Missouri Department of Public Safety **prior** to attending.

Supplies/Operations Budget Form

- Office Supplies – the following list constitutes “Office Supplies” for the grant project. An “office supplies” line item can be included on the Supplies/Operations Budget Page in reference to this approved list. You do not need to list separately any of the items contained in the list. If you are requesting funding for an item that is not contained within the list, you will need to show that item(s) separately on the Supplies/Operations budget page. Only office supplies for the SSVF project can be requested.

Office Supplies – pens, pencils, markers, highlighters, paper, letterhead, envelopes, paper clips, rubber bands, stapler, staples, rolodex, rolodex cards, scissors, note pad, telephone log, calendar, tape, tape dispenser, memo pad, post-it notes, white out, typewriter ribbon, print cartridges, correction tape, ruler, file folders, letter opener, hole punch, paper cutter, labels, dictionary, bulletin board, push pins, glue, blank tapes, blank floppy discs and blank cd's, pencil/supplies holder, adding machine tape, toner, business cards, phone cord, printer/computer cable, key tags, padlocks for cabinets, filing cart, index cards, notebook dividers, binder clips, ink-stamp, batteries for pagers, file box. ***Any other item must be specifically requested and approved by DPS and designated as a separate line item.***

- Registration costs for conferences/trainings should be listed on this budget page
- Membership dues, etc. cannot be requested (ineligible costs)
- Registration costs are not reimbursed until after the training has occurred.
- The titles of films, brochures, and other "miscellaneous items", not specifically outlined in the approved budget, must be submitted to the Missouri Department of Public Safety, Office of the Director, for approval **prior** to purchasing these items.

Contractual Budget Form

- If contractual budget items are necessary for the SSVF project, you must have a written contract for those services. A draft contract should be submitted with the application outlining what services will be performed, who will perform the requested contractual services, when they will be performed, and the rate at which they will be performed.
- All contractual services must be supported with detailed documentation that shows what services were performed and when they were performed for reconciliation with requests for contractual reimbursements.

PERSONNEL INFORMATION FORM

- If the Personnel Budget form is submitted with the application, this form must also be submitted.
- Only individuals **funded** through this grant program should be listed on this form.
- The “Job Responsibility” section should explain what this person would be doing on the grant program. If personnel are not funded 100% on the grant, detailed time accounting must be kept to track 100% of the employee’s time. A suggested format for time accounting can be found as an appendix to the application packet. If you are requesting a new position in the grant, submit the *PERSONNEL INFORMATION* form with whatever information can be provided at the time. (If a contract is awarded, submit the updated form to our office once the individual is hired so that it can be placed in the original file.)

NARRATIVE WORK PROGRAM

- The Narrative Work Program should provide, in detail, the need for the funding, the intended use of the funding, and the anticipated results of the program. The narrative work program should focus on the project to be funded, not the agency as a whole.
- On plain white paper, identify each of the specific sections of the *Narrative Work Program* as outlined below. **Please be sure to follow this outline in order and to include all of the information requested.** *Do not use pitch smaller than 12. Please space between the paragraphs to ensure ease in reading. Please number the pages of the Narrative Work Program. The Narrative Work Program should not be more than 14 pages overall.*

- A. History of the Program Project Agency** – Provide a brief history of the Project Agency and the type(s) of victim services provided. Also include any future plans for your victim services program.
- B. Statement of the Problem** – This section must address the need for grant funds and the proposed project. Define the problem that you will be attempting to impact with the project for which you are requesting funds. Be specific. Do not include every issue the Project Agency addresses, but only the one(s) that will be impacted by the use of the grant funds being requested. Since you are competing with other agencies for limited funds, you should document as extensively and as factually as possible the definition of the problem. This section must justify the proposed services to be outlined in Part E, Methodology. This section should include facts and local statistics on incidents of crime, the number of victims served during the past year - (two years, three years, etc.), existing resources, demographic and geographic specifications, etc. that support the stated problem.
- C. Goals and Objectives** – Explain your expectations (goals and objectives) for the proposed program **in outline format**.

GOAL:

A Goal is a broad based statement, which reflects an overall end result you are trying to attain. Goals are the grant program's desired results. The goals should be clearly stated, realistic and achievable, even if they are not readily measurable.

A project will usually have one goal.

Sample goal: Victim assistance services will be available to victims of crime in “X” County.

CHECK: Does the goal directly relate to the stated problem in Section B - Statement of the Problem?

Measurable Objectives

Measurable objectives reflect how your project will assist in reaching the stated goal(s). They also address the problem(s) identified and documented in the Statement of the Problem as well as the identified needs.

A measurable objective is something you are going **to do**, utilizing the grant funds, **by a certain amount** (measurable) within a certain period of time. Objectives **must** be measurable.

Measurable objectives use words like “to increase”, “to decrease”, or “to maintain”. Do not use words such as “to provide”, “to train”, “to establish” in measurable objectives. These are activity statements. Once you’ve written an objective, ask yourself if it allows you to measure something.

A project will normally have **one to three** objectives for each goal.

To help you in developing measurable objectives, review your project's activities and ask yourself what statistical data you will gather to prove your project is working. Focus on three to five things to measure that will prove your project is making a difference and works.

Sample Objective for a New Program: Increase the number of victims receiving emergency legal assistance (to do something) from 0 to 20 (by a certain number) during the grant period (within a certain period of time).

Sample Objective for an Existing Program: Increase the number of victims receiving assistance in applying for an ex parte (to do something) from 35 to 50 (by a certain amount) during the grant period (within a certain period of time).

Check: Do the objectives relate to the problem and documentation of the problem (statistics) in Section B – Statement of the Problem?

Be specific to this project; do not include overall agency goals or objectives.

D. Evaluation Procedure - Describe the process to be used to determine the effectiveness of your program and the effect of your program on the victims served, such as pre- and post-testing, surveys, client-satisfaction evaluations, etc. This must also include a description of the data to be collected, as outlined in the Program Description, to prepare any progress reports and/or final reports required by the State Services to Victims Fund. The evaluation component of the application should tie to the goals and objectives.

E. Methodology – This section must address the intended use of the grant funds. Following the outline shown below, give specific details concerning the organization, administration, and implementation of the project. Again, **be specific to this grant project**, not to the overall operation of the Project Agency. The following items must be addressed in this section:

- 1) **Type of Program** – Specifically outline the services to be provided by this project. Give as much detail as possible about your proposed project. Define what services will be provided through the grant program, who will provide these services, how they will be provided and who will benefit from the services your program will provide. Flow charts and chronological outlines are great, but must be supported by additional narrative description.
- 2) **Proposed Service Area** – State the geographic area to be served by this project.
- 3) **Coordination of Services** - Outline how your agency will coordinate the activities of this project with other service providers, law enforcement agencies, prosecuting attorney's offices and courts in your community. Other services may not necessarily be the same as offered by your project. Explain how the services to be offered by this project will complement other activities and services already in place in your community.
- 4) **Identification of Supporting Funds** – Specifically identify the source(s) of the supporting funds used for this project or other victim services provided by your agency. Identify who will be providing these funds, how much they will be providing and describe the source of the funds.
- 5) **Budget Justification** – Justify the need for all items listed in the budget for which SSVF funds will be used. Justify each individual budget line item. Do not just list the items requested for funding – explanation of each budget item must be included for consideration of funding. For personnel, you must also indicate if the position is an existing or new position. If the position currently exists, indicate how the position has been funded in the past. If a salary increase is included, provide the %

of increase and the date the increase will occur. If you are requesting funding for personnel or items that are currently funded by the agency but not funded through SSVF, please explain why SSVF should pick up these costs. **Any project cost that is currently paid by the Applicant Agency may be subject to the rules of supplanting and unallowable.**

- 6) **Supplanting** – Address the issue of supplanting as it pertains to this grant. ***Supplanting applies to Public, Governmental agencies applying for SSVF.*** If you are requesting funds for existing costs not covered through SSVF, please address in detail how using SSVF funds for these costs would not constitute supplanting. Not-For-Profit Agencies, while not subject to supplanting should explain the need for SSVF to cover costs previously funded by other sources.
- 7) **Victim Compensation Assistance** - Describe the procedures used by your agency to provide information on and assistance to crime victims with filing for victim's compensation funds.
- 8) **Volunteers** - Describe the procedures to recruit and train volunteers if they are used by your agency. (Include the type of training to be provided, the number of hours of training volunteers receive, eligibility or qualification requirements for volunteers, and the anticipated number of volunteers to be utilized by this SSVF funded project.)
- 9) **Number of Victims to Be Served** - Indicate the anticipated number of victims to be served by this SSVF funded project. Do not include the total number of victims served by your agency, but the number that will be served specifically by this particular project. For victims of domestic violence break out the number of women to be served and the number of children to be served separately. Give statistics from previous years to support your estimate.

F. Cost Assumption - Describe how the Project Agency plans to continue the activities of this project if *SSVF funds* would no longer be available to the Project Agency. What proactive steps are being taken to absorb the project cost into the applicant agency's future budget? Provide information on the development of a contingency plan for victim services.

G. Report of Success – *For existing SSVF grant recipients* - **In outline format, restate the goals and objectives from your current contract.** After each goal and objective listed, provide information regarding whether or not each has been attained to date. Include all information obtained pursuant to the "Evaluation" section of the narrative for your current contract. Please include actual numbers obtained along with the corresponding percentages (number of victims served, number of surveys sent out and returned, etc). Attach any reports, surveys, or other measurement tools that support the success of your project. Be sure to include any information required by the Performance Report as outlined in the Program Description. **Note: This component is applicable only to those proposals seeking continuation of a project already supported with SSVF funds.**

OTHER FORMS / REQUIRED DOCUMENTS

ADDITIONAL REQUIRED FORMS

Audit Requirements Form

Complete the Federal and State funds received section of the form even if you have not or are not required to have an audit completed.

Report of Expenditures and Check Payee Information

Complete the form as indicated.

Other Sources of Funding

This form should be used to list any other funds used for the grant project. Do not list all funding received by your agency; list only those sources of funding and what the funds are used for as they pertain to this project.

ADDITIONAL REQUIRED DOCUMENTS / INFORMATION

- ☐ **A detailed copy of your agency's organizational chart** – the chart should show the positions pertinent to this project
- ☐ **Your agency's procurement (purchasing) policy** (submit only if requesting travel, supplies/ops, equipment or contractual expenses)
- ☐ **Job descriptions for personnel involved in this proposed project.** These should include the job duties for the position and the minimum qualifications for the position
- ☐ **Your agency's current budget breakdown (for your agency as a whole).** Please provide your actual expenditure and income breakdown; you may also include your “balanced” budget.
- ☐ **A list of your organization's Board of Directors** (if agency is a nonprofit organization) – This list should include the positions/titles held by the Board Members
- ☐ **Letter from the IRS regarding your 501(c)(3) status** (if agency is a nonprofit organization) – We are no longer requiring the certification form. Please do not send your tax-exempt status letter from the State of Missouri in lieu of your 501(c)(3) letter from the Federal Internal Revenue Service.
- ☐ **A minimum of five (5) current, dated letters of support:**
 - Letters of support should indicate to the reader that the individual is familiar with the project you are requesting these grant funds for.
 - Letters of support should be specific to the project not the agency in general.
 - Letters from your agency’s authorized official, project director, commissioners, administrators or board members do not count towards the required five letters of support.
 - Multiple letters from victims will only count as one of the required five letters of support.
 - A Memorandum Of Agreement (MOA) cannot be submitted in lieu of the required five letters of support; it will count as one of the required five letters of support.
 - Please do not send “form” letters
 - Diversify whom the letters of support come from – do not have all of the letters of support come from victim service agencies.
 - Obtain letters of support from the agencies/organizations that your agency coordinates with (as outlined in the narrative work program).
 - No more than 2 of the 5 required letters of support may come from elected officials (in addition to the County Prosecutor and Sheriff if they provide letters of support).

ASSEMBLING THE APPLICATION

Please assemble the completed application in the **following order** for submission:

- ☐ Application Summary Report
- ☐ Application for Funding Form (Signed)
- ☐ Personnel Budget Form (if applicable)
- ☐ Volunteer Match Form (if applicable for VOCA and VAWA)
- ☐ Travel Budget Form (if applicable)
- ☐ Equipment Budget Form (if applicable)
- ☐ Supplies/Operations Budget form (if applicable)
- ☐ Contractual Budget form (if applicable)
- ☐ Copy of Contractual Agreement to be used
- ☐ Personnel Information Form (if submitting Personnel Budget Form)
- ☐ Job Descriptions (if submitting Personnel Budget Form)
- ☐ Narrative Work Program

- ☐ Your Agency's Current Budget
- ☐ Other Funding Sources Form
- ☐ Your Agency's Organizational Chart
- ☐ Agency Procurement Policy (if requesting funding for travel, supplies/ops, equipment or contractual)
- ☐ Certified Assurances (Signed)
- ☐ Audit Requirements form (Signed)
- ☐ Report of Expenditures and Check Payee Form
- ☐ Copy of IRS application/approval letter of 501(c)(3) (not-for-profits only)
- ☐ List of current Board of Directors (not-for-profits only)
- ☐ 5 current letters of support pertaining to this program

Please mark the **ORIGINAL Application** in the upper right hand corner of the face sheet. **PLEASE DO NOT BIND THE APPLICATION PACKETS – STAPLE IN THE UPPER LEFT HAND CORNER.**

SUBMITTING THE APPLICATION

The properly signed/assembled original *Application* and **two copies** (three total) must be completed and received by the Department of Public Safety, Office of the Director, no later than **4:30 p.m. on April 7, 2006** or postmarked no later than April 7, 2006.

NOTE: Applications sent using office-based postage meters will not be accepted if received in our office after April 7, 2006 regardless of the postmark date, as these postage meters are not acceptable proof of timely mailing. It is strongly recommended that applicants use the United States Postal Service or a traceable shipping service that guarantees a delivery date to ensure that applications arrive promptly.

Applications received via facsimile or e-mail will not be accepted at any time. Applications for the State Services to Victims Fund that do not meet the above submission requirements will not be considered for funding.

Three Sets of the Application (original plus two copies) must be submitted to:

In Person:

**Missouri Department of Public Safety
Harry S. Truman Office Building, Suite 870
Jefferson City, MO**

By Mail:

**Missouri Department of Public Safety
301 W. High Street, PO Box 749
Jefferson City, MO 65101**

NOTE: Portions of the application submitted under separate cover (letters of support or missing sections of the application) will not be placed with the original application. Carefully review your application to ensure that all required forms and documentation are submitted with the original application and copies.

APPLICATION REVIEW PROCESS

Competitive Bid Process

A review panel of various individuals from the Missouri Department of Public Safety and individuals from outside the department who do not have a financial interest in this program will be convened to review all the proposals received by the deadline as indicated above.

The review panel changes for each grant process and from year to year. This enables the Department of Public Safety to assure that more than one set of viewpoints on the issues surrounding victim services is expressed and utilized in the evaluation process. The Department of Public Safety staff provides a source of continuity in the review panel process.

In evaluating each application, both objective analysis and subjective judgment shall be used in conducting an assessment of the proposal in accordance with the grant guidelines in addition to the following criteria:

- Demonstration of need;
- Adequate correlation between the cost of the project and the objective(s) to be achieved;
- Probability of project to meet identified goal(s);
- Demonstration that State Services to Victims Program funds will not be used to supplant state and local funds (local units of government only) or that not-for-profit agencies adequately demonstrated the justification for receiving SSVF funds to replace other funds previously used for the program;
- Degree of cooperation between local officials, community groups, and citizens to fulfill goals for the overall success of the project;
- Demonstration that applicant agency has identified support and contributions for this project from sources other than the State Services to Victims Fund;
- Demonstration that the applicant agency has met and will continue to comply with all applicable state and federal laws and guidelines;
- Experience and expertise of the agency in the field of victim services;
- Overall quality of the application.

Applicants will not be contacted if an item is missing from the application.

The Department of Public Safety is required by law to make award decisions based on a competitive bid process. The funding requests are often for two to three times the funds available to disperse. Because of these circumstances, the review panel is expected to make some very difficult decisions. With the final approval of the director of the Department of Public Safety, applicants will be notified of the decisions made by the review panel. Applicants will be provided information on strengths, concerns or issues with the application/program.

DEPARTMENT OF PUBLIC SAFETY CONTACTS

Any questions regarding the application or the administration of your contract may be directed to the Department of Public Safety staff person indicated below at (573) 751-4905.

Audit and Financial Information: Carol Willhite
STATE SERVICES TO VICTIMS FUND GRANT PROGRAM
Responsible for issues concerning Expenditure Reports, Requests for Funds, and Monthly Detail Reports

Program Information: **Victim Services Grant Program Office**
STATE SERVICES TO VICTIMS FUND (SSVF)
Responsible for issues concerning the Application Process, Status of Awards, Budget Revisions, Program Changes, Monitoring Issues, Performance Reports, etc.

E-mail: victimsgrants@dps.mo.gov

Required Forms

SSVF APPLICATION SUMMARY REPORT

Agency Name		Program Title	
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Authorized Official Name and Address	Project Director Name and Address	Contact Person Name and Address
Name: _____	Name: _____	Name: _____
Address: _____ _____	Address: _____ _____	Address: _____ _____
City: _____	City: _____	City: _____
State/Zip: _____	State/Zip: _____	State/Zip: _____
E-Mail: _____	E-Mail: _____	E-Mail: _____
Phone Number: (____) ____ - ____	Phone Number: (____) ____ - ____	Phone Number: (____) ____ - ____
Fax Number: (____) ____ - ____	Fax Number: (____) ____ - ____	Fax Number: (____) ____ - ____

Total Amount of SSVF Funds Requested \$ _____

Prorate the SSVF Funds Requested (give dollar amount and percentage) by types of victims to be served: (Please give your best estimates.)

\$ _____ % Domestic Violence \$ _____ % Child Abuse \$ _____ % Sexual Assault

\$ _____ % Total Underserved and Other (Break out total of Underserved/Other and prorate Total below)

Prorated Amounts and % of Underserved (\$ and % must equal \$ and % Total Underserved and Other above):

Description of Underserved/Other	Prorated \$ Amount	% Of Total Underserved and Other
	\$	%
	\$	%
	\$	%
	\$	%
	\$	%

Indicate the anticipated number of victims to be served by this SSVF funded project: _____ Total Victims of Crime _____ Hotline Calls
(Not hotline calls)

If a domestic violence shelter, indicate the anticipated number of women and children _____ Women _____ Children _____ Hotline Calls
to be served in shelter or outreach services, the number of anticipated hotline calls and
the anticipated number of bednights. _____ Bednights

Geographic Area(s) to be served by this SSVF project: _____

The requested SSVF funds will be used to: ___ Fund a New Project ___ Expand/Enhance an Existing Project ___ Continue a Previously Funded SSVF Project

Give a brief summary of the SSVF project. (Please type the description on this form.)



SECTION 1 – INSTRUCTIONS			
This application must be typewritten. Please refer to the enclosed instructions to complete this form.			
SECTION 2 – GRANT PROGRAMS			
<input type="checkbox"/> VOCA – Victims of Crime Act		<input type="checkbox"/> SSVF - State Services to Victims Fund	
<input type="checkbox"/> Byrne – Byrne Formula Grant (NCAP)		<input type="checkbox"/> STOP - Stop Violence Against Women Grant Program	
<input type="checkbox"/> CLAP – Crime Lab Assistance Program		<input type="checkbox"/> MCLUP – Mo. Crime Lab Upgrade Program	
<input type="checkbox"/> Title V – Delinquency & Youth Violence Prevention		<input type="checkbox"/> RSAT – Residential Substance Abuse & Treatment Program	
<input type="checkbox"/> Title II – Juvenile Justice Formula Grants		<input type="checkbox"/> LGSD – Local Government School District Program	
<input type="checkbox"/> Challenge – Statewide Policies and Programs		<input type="checkbox"/> JAIBG – Juvenile Accountability Incentive Block Grant	
SECTION 3 – APPLICANT AGENCY		SECTION 8 – PROJECT TITLE	
AGENCY		FAX	
ADDRESS		PHONE	
CITY		STATE	
ZIP		SECTION 9 – TYPE OF APPLICATION	
		<input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Renewal <input type="checkbox"/>	
SECTION 4 – APPLICANT AUTHORIZED OFFICIAL		SECTION 10 – CURRENT CONTRACT NUMBER(S)	
NAME			
FAX		SECTION 11 – APPLICANT'S FEDERAL TAX I.D. #	
PHONE			
TITLE		SECTION 12 – PROGRAM CATEGORY	
AGENCY			
ADDRESS		SECTION 13 – CONTRACT PERIOD	
CITY		BEGINNING DATE	
STATE		ENDING DATE	
ZIP		SECTION 14 – TYPE OF PROJECT	
SECTION 5 – PROJECT DIRECTOR			
NAME		SECTION 15 – PROGRAM INCOME	
FAX		Will Program Income be generated? <input type="checkbox"/> Yes <input type="checkbox"/> No	
PHONE		SECTION 16 – BUDGET	
TITLE		PERSONNEL	
E-Mail Address:		VOLUNTEER MATCH	
AGENCY		TRAVEL	
ADDRESS		EQUIPMENT	
CITY		SUPPLIES/OPERATIONS	
STATE		CONTRACTUAL	
ZIP		RENOVATION/CONSTRUCTION	
SECTION 6 – APPLICANT FISCAL OFFICER		TOTAL PROJECT COSTS	
NAME		FEDERAL/STATE SHARE	
FAX		%	
PHONE		LOCAL MATCH SHARE	
TITLE		%	
AGENCY		SECTION 17 – AUTHORIZED OFFICIAL'S SIGNATURE	
ADDRESS			
CITY		Signature	
STATE		Date	
ZIP			

Instructions for Application for Funding

Section 1 – Instructions

This application must be typewritten.

Section 2 – Grant Programs

Section 3 – Applicant Agency

Enter the legal name and address of the organization that has the authority to legally bind the agency in a contract.

For an agency within a city government system (i.e. Police Department), the **city** is the applicant organization. For an agency within a county government system (i.e. Sheriff's Department, Prosecuting Attorney's Office), the **county** is the applicant organization. For an agency within a judicial circuit (i.e. Circuit Court, Juvenile Office), the **county** that provides fiscal management is the applicant organization.

Byrne and LLEBG– Only state and local units of government are eligible to apply for this funding.

LGSD – Only local units of government which have entered into a local government/school district partnership as defined in Section 589.300 to 589.310, Supp. 1995 are eligible to apply for this funding.

Title V - Only local units of government are eligible to apply for this funding.

Section 4 – Applicant Authorized Official - This person cannot be the same person named as the Project Director.

Enter the name and address of the individual who has the authority to legally bind the applicant agency, as listed in Section 3, in a contract.

City Government – If the applicant agency is a city, the mayor/city administrator shall be the Authorized Official.

County Government – If the applicant agency is a county, the county commissioner/administrator shall be the Authorized Official.

Private/Nonprofit – If the applicant agency is a private, nonprofit organization, the Authorized Official must be the individual who has the legal authority to bind the organization in a contract. Any potential funds awarded as a result of this application cannot be used for the salary of the Authorized Official. Generally, the executive director of the organization or the board chairperson for the organization may act as the Authorized Official.

Section 5 – Project Director

Enter the name and address of the person who will have direct oversight of the proposed project.

If the project agency is a local law enforcement agency, the Project Director shall be the chief or sheriff of that agency. Exceptions to this requirement are the St. Louis Metropolitan Police Department and the Kansas City Police Department.

Section 6 – Applicant Fiscal Officer

Enter the name and address of the individual who has responsibility for project accounting, reporting, and closeout.

Section 7 – Non-Profit Board Chairperson

Enter the name and address of the individual serving as the organization's board chairperson. Please provide an address other than the agency address if possible.

**This section is not applicable to agencies that are not considered a 501 (c) (3) non-profit organization.*

Section 8 – Project Title

Enter a carefully chosen, brief descriptive title.

Section 9 – Type of Application

Indicate the type of application based on the following:

NEW - If this application is being submitted as part of a competitive bid process, the type of application is considered **"New"**.

REVISED - If the agency has specifically been asked by the Department of Public Safety to revise a portion of a New or Renewal application, the type of application is considered **"Revised"**.

RENEWAL - If the agency has specifically been notified of the opportunity to renew an existing contract, the type of application is considered **"Renewal"**.

CONTINUATION – If this application is being submitted as part of a competitive bid process to continue a program currently funded by the Department of Public Safety, the type of application is considered **"Continuation"**.

Section 10 – Current Contract Number(s)

Indicate the DPS Contract Number if the applicant agency currently has a contract through the identified grant program.

Section 11 – Applicant's Federal Tax I.D. Number

Enter the applicant organization's Federal Tax Identification Number. This number must be included in order to document receipt of this application.

Section 12 – Program Category

Enter the appropriate categorical description for this proposed project. Refer to the Program Description section of the application for a listing of the appropriate categories.

This section is not required for VOCA, SSVF, STOP, Title V or Challenge grants.

Section 13 – Contract Period

Enter the appropriate contract period for this proposed project. Please see the following listing.

VOCA – October 1 through September 30

SSVF – July 1 through June 30

STOP – January 1 through December 31

Title V – October 1 through September 30

Title II – October 1 through September 30

JAIBG – October 1 through September 30

Challenge – See Program Description

Byrne – July 1 through June 30

MCLUP – July 1 through June 30

RSAT – July 1 through June 30

CLAP – July 1 through June 30

LLEBG – May 1 through October 31

LGSD – July 1 through June 30

Section 14 – Type of Project

Check the appropriate box.

Section 15 – Program Income

If program income will be generated by this proposed project, please indicate in this section. Refer to the program application for information on program income.

Section 16 – Budget

Refer to the program application for the appropriate funding categories for the proposed project. Enter the total cost amounts from each individual budget page in the appropriately identified space. Enter the total Project Cost based on the totals taken from the individual budget pages. Enter the federal/state share and the local match shares. Make sure that the total federal/state share from the individual budget pages agrees with the amount entered on this sheet. Also make sure that the total local match share calculated from the individual budget pages agrees with the amount entered in this section. Refer to the program application for the description of the local match share if required.

Section 17 – Authorized Official's Signature

This application must bear the ORIGINAL SIGNATURE of the Authorized Official as identified in Section 4.

PERSONNEL		PROJECT TITLE:				
		APPLICANT AGENCY:				
INSTRUCTIONS						
1. Include all personnel to be employed on the proposed project. 2. Under Title or Position , list each proposed position. 3. Under Name of the Individual , list the name of the person who will fill each proposed position (if known). 4. Show Gross Monthly Salary for each individual and show the Percent Of Time to be devoted to this grant-funded project. 5. The Total Costs should be calculated as follows: $(\text{Salary/Month}) \times (\% \text{ of Time on Grant}) \times (\text{Months to be employed})$.				6. Under the Fringe Benefits section, identify the particular benefits such as social security, workers' compensation, medical insurance, etc. If dental and vision insurance are not included in the health insurance premium they should be listed separately. All fringe benefits provided must be itemized. 7. Under the column entitled Basis for Cost Estimate , enter the formula for computing the cost for each fringe benefit. 8. Enter the total in the Total Cost column.		
TITLE OR POSITION	NAME OF INDIVIDUAL	SALARY PER MONTH	FT OR PT	% OF TIME ON GRANT	MONTHS TO BE EMPLOYED	TOTAL COST
SUBTOTAL						\$
FRINGE BENEFITS		BASIS FOR COST ESTIMATE				
F.I.C.A. & Medicare (.0765) PENSION/RETIREMENT LIFE INSURANCE MEDICAL INSURANCE UNEMPLOYMENT COMPENSATION WORKERS' COMPENSATION LIAB. OTHER (PLEASE IDENTIFY)						
SUBTOTAL						\$
State/Federal Share	\$	TOTAL PERSONNEL COST				\$
Local Match Share	\$					

PERSONNEL	PROJECT TITLE: Counseling services for Crime Victims					
	APPLICANT AGENCY: Crime Victim Assistance Agency					
INSTRUCTIONS						
1. Include all personnel to be employed on the proposed project. 2. Under Title or Position , list each proposed position. 3. Under Name of the Individual , list the name of the person who will fill each proposed position (if known). 4. Show Gross Monthly Salary for each individual and show the Percent Of Time to be devoted to this grant-funded project. 5. The Total Costs should be calculated as follows: (Salary/Month) x (% of Time on Grant) x (Months to be employed).				6. Under the Fringe Benefits section, identify the particular benefits such as social security, workers' compensation, medical insurance, etc. If dental and vision insurance are not included in the health insurance premium they should be listed separately. All fringe benefits provided must be itemized. 7. Under the column entitled Basis for Cost Estimate , enter the formula for computing the cost for each fringe benefit. 8. Enter the total in the Total Cost column.		
TITLE OR POSITION	NAME OF INDIVIDUAL	SALARY PER MONTH	FT OR PT	% OF TIME ON GRANT	MONTHS TO BE EMPLOYED	TOTAL COST
Advocate	Jane Doe	2000	FT	100	12	24,000
Advocate	Jill Smith	2000	FT	75	12	18,000
SUBTOTAL						\$ 42,000
FRINGE BENEFITS	BASIS FOR COST ESTIMATE					
F.I.C.A. & Medicare (.0765)	42,000 * 7.65%					3,213.00
PENSION/RETIREMENT	N/A					0.00
LIFE INSURANCE	J. Doe - \$7.25/ month *12 = \$87.00, J. Smith - \$7.25/month * 75% * 12 = 65.25					152.25
MEDICAL INSURANCE	J. Doe - \$210/month					2,520.00
UNEMPLOYMENT COMPENSATION	N/A					0.00
WORKERS' COMPENSATION LIAB.	N/A					0.00
OTHER (PLEASE IDENTIFY)	Dental Insurance: J. Doe - \$6.75/month					81.00
SUBTOTAL						\$ 5966.25
State/Federal Share	\$ 47,966.25					TOTAL PERSONNEL COST \$ 47,966.25
Local Match Share	\$ 0.00					

PERSONNEL INFORMATION


Grant Project Staff Only

Staff Member	Brief List of Experience and Current Job Responsibilities
1. _____ (Name) _____ (Title)	
2. _____ (Name) _____ (Title)	
3. _____ (Name) _____ (Title)	
4. _____ (Name) _____ (Title)	
5. _____ (Name) _____ (Title)	
6. _____ (Name) _____ (Title)	

TRAVEL		PROJECT TITLE:	
		APPLICANT AGENCY:	
INSTRUCTIONS			
1. Itemize travel expenses by event. 2. Under the Item, list the type of travel (local, in-state, out-state), location and reason for travel. 3. Under the Basis for Cost Estimate, supply information regarding total distance to be traveled, the rate per mile, total days of travel, daily subsistence allowance, and number of people traveling. 4. Justify in the narrative (under Budget Justification) why the travel is necessary for project execution and who will be traveling. 5. In training projects, where travel and subsistence of trainees is included, list the item separately and show the number of trainees and the allowance per trainee.		6. Tuition and registration fees for eligible training <u>must be listed under the Supplies/Operations</u> category. 7. Enter the costs in the Total Cost column. 8. The amount of mileage allowance shall not exceed 41.5¢ per mile and shall not exceed actual transportation fare where public common-carrier transportation is used (exclusive of first class accommodations.) Travel must be by the most direct practical route. Actual transportation expenses and the amount of meal charges shall not exceed the actual costs and must be reasonable. Lodging expenses will be reasonable. Local rules and regulations will apply if they are more restrictive than those mentioned above. Travel expenses will not be reimbursed until the travel has occurred.	
ITEM	BASIS FOR COST ESTIMATE		TOTAL COST
State/Federal Share	\$	TOTAL TRAVEL COST	\$
Local Match Share	\$		

TRAVEL	PROJECT TITLE: Counseling services for Crime Victims	
	APPLICANT AGENCY: Crime Victim Assistance Agency	
INSTRUCTIONS		
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <ol style="list-style-type: none"> 1. Itemize travel expenses by event. 2. Under the Item, list the type of travel (local, in-state, out-state), location and reason for travel. 3. Under the Basis for Cost Estimate, supply information regarding total distance to be traveled, the rate per mile, total days of travel, daily subsistence allowance, and number of people traveling. 4. Justify in the narrative (under Budget Justification) why the travel is necessary for project execution and who will be traveling. 5. In training projects, where travel and subsistence of trainees is included, list the item separately and show the number of trainees and the allowance per trainee. </div> <div style="width: 48%;"> <ol style="list-style-type: none"> 6. Tuition and registration fees for eligible training <u>must be listed under the Supplies/Operations</u> category. 7. Enter the costs in the Total Cost column. 8. The amount of mileage allowance shall not exceed 41.5¢ per mile and shall not exceed actual transportation fare where public common-carrier transportation is used (exclusive of first class accommodations.) Travel must be by the most direct practical route. Actual transportation expenses and the amount of meal charges shall not exceed the actual costs and must be reasonable. Lodging expenses will be reasonable. Local rules and regulations will apply if they are more restrictive than those mentioned above. Travel expenses will not be reimbursed until the travel has occurred </div> </div>		
ITEM	BASIS FOR COST ESTIMATE	TOTAL COST
Local mileage for Advocates to transport victims to court, shelter, etc.	400 miles annually * \$0.415 / mile	166.00
Mileage to attend State Annual Victim Conference in Columbia, MO August 1 – 3, 2006	200 miles roundtrip * \$0.415 / mile	83.00
Meals not provided at conference while attending State Annual Victim Conference in Columbia, MO August 1 – 3, 2006	\$25 / day / per advocate for 4 days each (travel day July 31, 2006)	200.00
Lodging while attending State Annual Victim Conference in Columbia, MO August 1 – 3, 2006	\$60 room / day for 3 nights / per advocate	360.00
<div style="display: flex; justify-content: space-between;"> <div> State/Federal Share \$ 809.00 Local Match Share \$ 0.00 </div> <div> TOTAL TRAVEL COST \$ 809.00 </div> </div>		

****Please note the conference example given is fictitious!**

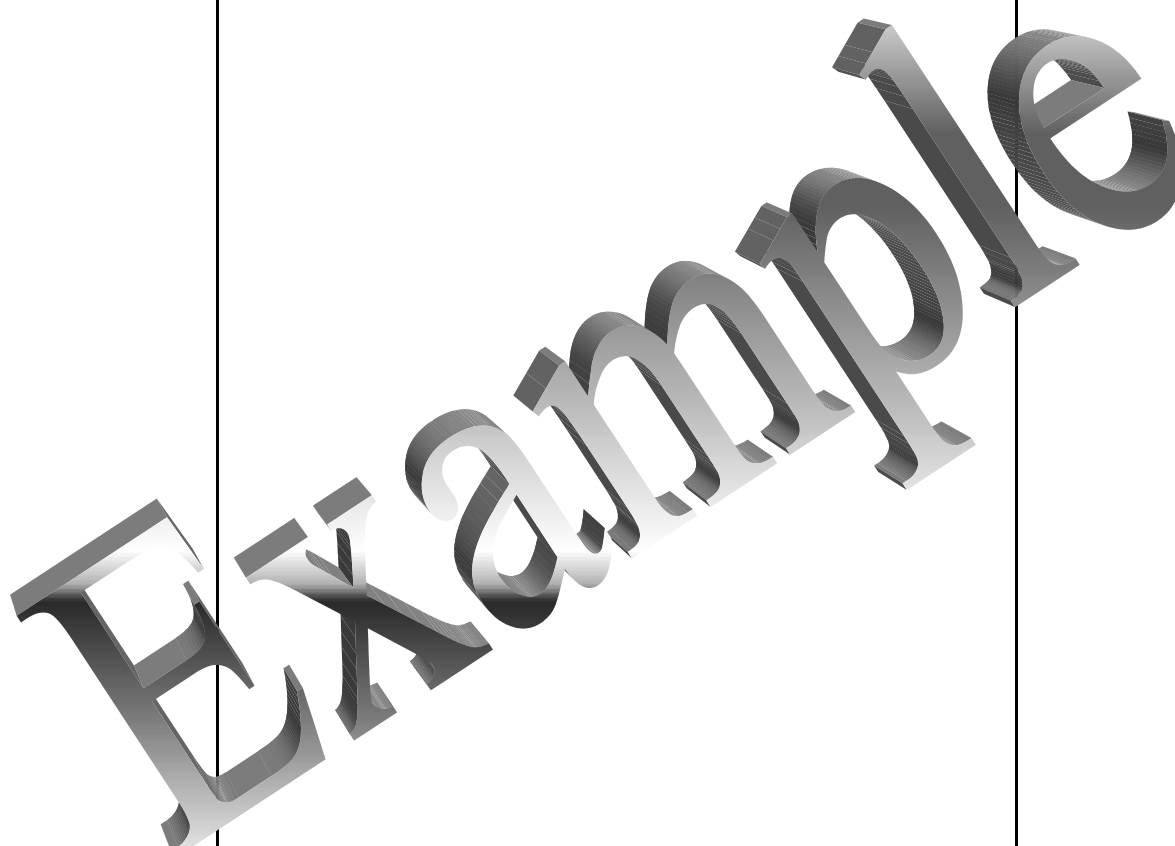
EQUIPMENT	PROJECT TITLE: Counseling services for Crime Victims		
	APPLICANT AGENCY: Crime Victim Assistance Agency		
INSTRUCTIONS			
1. Equipment is defined as tangible personal property having a useful life of more than one year. 2. Under the Item column, describe each type of equipment in terms of size, capability, etc.		3. Under the Basis for Cost Estimate , list the number of units of each type of equipment and provide a unit cost. 4. Under the Total Cost column, record the cost to be calculated as follows: (number of units) x (unit cost).	
ITEM	BASIS FOR COST ESTIMATE		TOTAL COST
Hewlett Packard InkJet Printer	1 printer for therapist @ \$300		\$300.00
			
State/Federal Share	\$	300.00	TOTAL EQUIPMENT COST \$ 300.00
Local Match Share	\$	0.00	

SUPPLIES/OPERATIONS		PROJECT TITLE:
		APPLICANT AGENCY:
INSTRUCTIONS		
1. Under the Item column, list by type of supply or operational expense (i.e., office supplies, training materials, telephone, postage, etc.). Be as specific as possible. 2. Under the Basis for Cost Estimate column, list the cost per unit and the number of units requested.		3. Under Total Cost column, record the cost to be calculated as follows: (number of units) x (unit cost). 4. Tuition and registration fees for eligible training must be listed on this page. These expenses will not be reimbursed until the training has occurred. 5. Please refer to the Certified Assurances pertaining to supplies and operating expenses for further information.
ITEM	BASIS FOR COST ESTIMATE	TOTAL COST
State/Federal Share	\$	TOTAL SUPPLIES/ OPERATIONS COST \$
Local Match Share	\$	

SUPPLIES/OPERATIONS	PROJECT TITLE: Counseling services for Crime Victims		
	APPLICANT AGENCY: Crime Victim Assistance Agency		
INSTRUCTIONS			
1. Under the Item column, list by type of supply or operational expense (i.e., office supplies, training materials, telephone, postage, etc.). Be as specific as possible. 2. Under the Basis for Cost Estimate column, list the cost per unit and the number of units requested.		3. Under Total Cost column, record the cost to be calculated as follows: (number of units) x (unit cost). 4. Tuition and registration fees for eligible training must be listed on this page. These fees will not be reimbursed until the training has occurred. 5. Please refer to the Certified Assurances pertaining to supplies and operating expenses for further information.	
ITEM	BASIS FOR COST ESTIMATE		TOTAL COST
Office Supplies	Office supplies for Advocates Doe and Smith and contractual therapist. SSVF project equals 25% of agency budget. Annual office supplies cost = \$2,000 * 25%		500.00
Registration for State Annual Victim Conference August 1 – 3, 2006 in Columbia, MO	Registration Cost = \$150/person. Registration for J. Doe and J. Smith.		300.00
<div style="position: relative; height: 300px;"> Example </div>			
State/Federal Share	\$ 800.00	TOTAL SUPPLIES/ OPERATIONS COST	\$ 800.00
Local Match Share	\$ 0.00		

****Please note the conference example given is fictitious!**

CONTRACTUAL		PROJECT TITLE:	
		APPLICANT AGENCY:	
INSTRUCTIONS			
1. Under the Nature of Service column, describe the types of consultant services or contracts desired. 2. Under the Basis for Cost Estimate , enter the total amount of time to be used and the rate of compensation per unit of time. <i>In the narrative under budget justification, include statements justifying the rate of compensation per unit of time and the necessity for including the costs in the project budget.</i>		3. In the Total Cost column, record the costs to be calculated as follows: (amount of time) x (rate of compensation). 4. A copy of any contractual agreement made as a result of an award through this grant program must be forwarded to the Department of Public Safety. Any service that does not have a contractual agreement cannot be listed on this page. 5. Any contractual agreement entered into as a result of an award of contract by DPS must be for a time period within the contract period designated by DPS.	
NATURE OF SERVICE	BASIS FOR COST ESTIMATE		TOTAL COST
State/Federal Share	\$	TOTAL CONTRACTUAL COST	\$
Local Match Share	\$		

CONTRACTUAL	PROJECT TITLE: Counseling services for Crime Victims		
	APPLICANT AGENCY: Crime Victim Assistance Agency		
INSTRUCTIONS			
1. Under the Nature of Service column, describe the types of consultant services or contracts desired. 2. Under the Basis for Cost Estimate , enter the total amount of time to be used and the rate of compensation per unit of time. <i>In the narrative under budget justification, include statements justifying the rate of compensation per unit of time and the necessity for including the costs in the project budget.</i>		3. In the Total Cost column, record the costs to be calculated as follows: (amount of time) x (rate of compensation). 4. A copy of any contractual agreement made as a result of an award through this grant program must be forwarded to the Department of Public Safety. Any service that does not have a contractual agreement cannot be listed on this page. 5. Any contractual agreement entered into as a result of an award of contract by DPS must be for a time period within the contract period designated by DPS.	
NATURE OF SERVICE	BASIS FOR COST ESTIMATE		TOTAL COST
Individual Therapy for Crime Victims	Therapist A will provide 10 hours of therapy per week/ 1 hour per session for identified victims of crime. 1 hour session @ \$30/hour		300.00
			
State/Federal Share	\$300.00	TOTAL CONTRACTUAL COST	300.00
Local Match Share	\$0.00		

OTHER FUNDING SOURCES

List the agency's other funding sources for this project. Include any other sources of federal, state, local, or private funding. *(Make copies of this form if necessary.)*

Source of Funding	Amount	Description of the Funding	Funding Period	Expenditures Covered by Funding
	\$			
	\$			
	\$			
	\$			
	\$			
	\$			



SSVF CERTIFIED ASSURANCES



AGENCY NAME:

PROJECT TITLE:

In addition to the general terms contained in the *Application Packet*, the applicant is also conditioned upon and subject to compliance with the following conditions.

1. The applicant agrees to comply with the provisions of the *Missouri Department of Public Safety Financial & Administrative Guidelines for Contracts*.
2. The applicant agrees to maintain the records necessary to evaluate the effectiveness of the project.
3. The applicant agrees to submit an evaluation of the project within 15 days of the project ending date or upon request by the Department of Public Safety.
4. The applicant agrees to comply with the provisions outlined in the *Program Description for the State Services to Victims Fund Program*.
5. **Travel:** Expenditures for travel must be supported and documented by signed travel vouchers. Hotel or motel and meal receipts must be on file. Maximum amounts have been established for mileage, meals and other expenses. **The applicant may check with the Department of Public Safety, Office of the Director, for current rates.** Reimbursement of travel expenses will not occur until after the travel has taken place.
6. **Equipment:** Expenditures for equipment must be in accordance with the approved budget. All items of equipment must be assigned an inventory number and be readily identifiable as being purchased with Missouri Department of Public Safety funds.

The applicant certifies that all expendable and non-expendable property purchased with funds awarded under this contract shall be used for victim assistance purposes only.
7. **Supplies\Operating Expenses:** Expenditures for supplies and operating expenses shall be in accordance with the approved budget and documentation in the form of paid bills and vouchers must support each expenditure. Care shall be given to assure that all items purchased directly relate to the specific project objectives for which the contract was approved. The titles of films, brochures, and other "miscellaneous items", not specifically outlined in the approved budget, must be submitted to the Missouri Department of Public Safety, Office of the Director, for approval **prior** to purchasing same. The titles, sponsors, dates and locations of training, seminars and conferences not specifically outlined in the approved budget must be submitted to the Missouri Department of Public Safety **prior** to attendance at same. Reimbursement of conference registration fees will not be reimbursed until the conference has taken place.
8. **Personnel:** The applicant assures that detailed time and attendance records shall support all personnel costs and that proper records shall be maintained to adequately substantiate time spent to carry out the specific objectives for which the contract was approved. **All** SSVF funded employees must keep a timesheet of all activities to document time spent on the project. Only actual time spent on the project may be claimed. The timesheets must include the date, the beginning time, a brief description of, and the ending time for each task performed by the employee.
9. **Interest:** The applicant assures that state funds will not be used to pay interest.
10. **Budget Revisions:**
Formal Budget Revisions: Prior approval must be received from the Missouri Department of Public Safety, Office of the Director, for certain types of changes to the budget or project scope. These types of changes are listed below:
 - a. The addition or deletion of a specific budget line item
 - b. Monetary additions to the Personnel Budget Category
 - c. A change in the approved budget categories in excess of 10 percent of the total **award** amount.
 - d. A change in the scope of the project
 - e. A change in or temporary absence of the project director or authorized official
 - f. A change in the project site
 - g. A change in the name of the agency.

Prior approval must be received from the Missouri Department of Public Safety for any **programmatic** changes in the contract.

Timing of Formal Budget Revisions: If a budget or programmatic revision is required, the request for a change must be submitted at least 30 days prior to the proposed change taking effect and at least 60 days prior to the end of the contract. Budget revisions must be requested on the required form. Budget revisions will not be retroactive unless there are extenuating circumstances presented.

Informal Budget Revisions: Prior approval does not need to be sought from the DPS when transferring less than 10% (cumulative during the contract period) of the total grant award from one budget category to another budget category (except for the Personnel budget – prior

approval for movement of funds into this category is necessary).

11. **Contractual Services:** The applicant assures that the following general requirements will be followed when subcontracting for work or services contained in this proposal:

- a. All consultant and contractual services shall be supported by written contracts stating the services to be performed, rate of compensation and length of time over which the services will be provided. (The grant is not required to pay any contractual fees incurred before or after the grant period.)
- b. A copy of all signed, written contracts for contractual or consultant services must be forwarded to the Missouri Department of Public Safety, Office of the Director, upon their ratification.
- c. Statements that outline the services rendered and support the period covered must support payments.
- d. Any contract or agreement for service of \$3,000 or more which is not entered into as a result of competitive bidding procedures (or if only one bid is received) must receive prior approval from the Missouri Department of Public Safety, Office of the Director.
- e. Compensation for individual consultant services is to be reasonable and consistent with that paid for similar services in the market place. The maximum rate for consultants is \$450 (excluding travel and subsistence costs) for an eight-hour day. An eight-hour day may include preparation, evaluation, and travel time in addition to the time required for actual performance. A request for over \$450 per day requires prior approval and additional justification.

12. **Sole Source Procurement:** When only one bid is received or only one vendor is contacted, the purchase is deemed to be sole source procurement. Sole source procurement on purchases with an individual cost of \$3,000 or more requires **prior** approval by the Missouri Department of Public Safety, Office of the Director.

13. The applicant shall fully coordinate all activities in the performance of the project with those of the Missouri Department of Public Safety, Office of the Director.

14. If the applicant is a public, governmental entity, the applicant assures that State Services to Victims Program funds made available will not be used to supplant state or local funds, but will be used to increase the amount of such funds that would, in the absence of the State Services to Victims Program, be made available for the activities of this project.

15. The applicant certifies that all expendable and non-expendable property purchased with funds awarded under this contract shall be used for victim assistance purposes only.

16. The applicant assures that fund accounting, auditing, monitoring, and such evaluation procedures as may be necessary to keep such records as the Missouri Department of Public Safety, Office of the Director shall prescribe will be provided to assure fiscal control, proper management, and efficient disbursement of funds received under this contract.

17. The applicant assures that it shall maintain such data and information and submit such reports, in such form, at such times, and containing such information as the Missouri Department of Public Safety, Office of the Director, may require.

18. The applicant assures that, if required to formulate an Equal Employment Opportunity Program (EEOP) in accordance with 28 CFR 42.301 et.seq., it will submit a certification to the Missouri Department of Public Safety that it has a current EEOP on file which meets the requirements therein. The applicant assures that it will provide to the Missouri Department of Public Safety an EEOP, if required to maintain one, where the application is for \$500,000 or more.

19. The applicant assures that, in connection with the furnishing of services under this contract, it will comply and any subcontractors will comply, with all applicable requirements and provisions of the Americans with Disabilities ACT (ADA).

20. If the applicant is a law enforcement agency, the applicant assures that the agency is in compliance with sections 590.100 to 590.180, RSMo. Section 590.180, subsection 2 states that "any law enforcement agency which employs a peace officer who is not certified as required by sections 590.100 to 590.180 shall not be eligible to receive state or federal funds which would otherwise be paid to it for purposes of training and certifying peace officers or for other law enforcement, safety or criminal justice purposes.

21. If the applicant is a law enforcement agency, the applicant assures that the agency is in compliance with the provisions of Section 43.505, RSMo relating to uniform crime reporting, and Section 590.650, RSMo relating to racial profiling.

22. The applicant assures that it will provide the eligible direct victim services, as may be required, set forth in Missouri's Constitutional Amendment for Victims' Rights and **Section 595.209, RSMo**. (These eligible direct victim services do not include general witness assistance.)

23. The applicant assures that they will formally report to the Missouri Department of Public Safety within 48 hours of notification that a Department of Public Safety grant-

funded individual is arrested for or formally charged with a misdemeanor or felony regardless if the criminal infraction is related to the individual's employment.

The Department of Public Safety reserves the right to suspend or terminate grant funding pending the adjudication of the criminal infraction.

24. The Missouri Department of Public Safety, Office of the Director reserves the right to suspend or terminate any contract entered into as a result of this application at its sole discretion and without penalty or recourse by giving written notice to the contractor. In the event of termination pursuant to this paragraph, all documents, data, and reports prepared by the contractor under the contract shall, at the option of the Missouri Department of Public Safety, become property of the State of Missouri. The contractor shall be entitled to receive just and equitable compensation for that work completed prior to the effective date of suspension or termination.
25. An award of contract, entered into as a result of this application, shall not bind or purport to bind the

Department of Public Safety for any contractual commitment in excess of the original contract period contained in such an award of contract. However, the Department of Public Safety shall have the right, at its sole discretion, to renew any such award of contract on a year-to-year basis. Should the Department of Public Safety exercise its right to renew the contract, the renewal shall be subject to the terms set forth by the Department of Public Safety in the documents developed for such renewal. Failure to comply with such terms set forth by the Department of Public Safety will result in the forfeiture of such a renewal option.

26. It is understood and agreed upon that, in the event funds from state and/or federal sources are not appropriated and continued at an aggregate level sufficient to cover the contract costs, or in the event of a change in federal or state laws relevant to these costs, the obligations of each party hereunder shall thereupon be terminated immediately upon receipt of written notice.

Failure to comply with any of the foregoing certified assurances could result in the termination of the award of contract or funds being withheld until such time as the contractor takes appropriate action to rectify the incident(s) of non-compliance. The applicant hereby certifies, by original signature, acceptance of the terms and conditions specified or incorporated by reference herein, including those stated in the contract application packet.

Authorized Official **Date**

Project Director **Date**

AUDIT REQUIREMENTS

If you are awarded funds through the Missouri Department of Public Safety, you **ARE** required to submit a copy of your agency's audit for the period covered by this contract.

- ⇒ An audit is required for the agency fiscal year, when **State** financial assistance, (which consists of funds received directly from the State of Missouri, but does not include federal pass-through funds), of **\$100,000** or more is expended by the applicant agency.
- ⇒ An audit is required for the agency fiscal year, when **Federal** financial assistance, (which consists of funds received from the Federal Government or federal funds passed through state agencies), of **\$500,000** or more is expended by the applicant agency.
- ⇒ No audit of any type is required when **STATE** financial assistance of less than \$100,000 or **FEDERAL** financial assistance of less than \$500,000 is expended. However, the recipient must maintain detailed records on grant activity required for such grants.

This section must be completed even if your agency is not required to submit an audit to the Missouri Department of Public Safety.

1. Date of last audit: _____ 2. Date(s) covered by last audit: _____

3. Last audit performed by: _____

Phone number of auditor: _____

4. Date of next audit: _____ 5. Date(s) to be covered by next audit: _____

6. Next audit will be performed by: _____

Phone number of auditor: _____

7. Total amount of funds received from ***ALL*** entities ***INCLUDING*** the Department of Public Safety

Federal Amount: \$ State Amount: \$

NOTE: State Auditor of Missouri audits all state agencies, third class counties, and all judicial circuits. First, second, and fourth-class counties and other local political subdivisions and not-for-profit agencies must make arrangements with a private CPA firm to perform an audit.

Signed: _____
(Authorized Official)

Date: _____

Agency: _____

Phone: _____

REPORT OF EXPENDITURES AND CHECK PAYEE INFORMATION

The following information is necessary if your agency receives a contract from the Missouri Department of Public Safety

Name and address of the individual who will be responsible for completing the Monthly Report of Expenditures and Request for Reimbursement. *(The Monthly Report of Expenditures and Request for Reimbursement will be mailed to this individual each month.)*

NAME: _____

AGENCY: _____

ADDRESS: _____

(Include city, state, and zip)

TELEPHONE: _(_____)_____ FAX NUMBER: _____

E-MAIL ADDRESS: _____

Check Payee Information - List the name and address of the check payee. Do not include an individual's name, *only the name and address of the agency to which the check must be made payable.*

AGENCY: _____

ADDRESS: _____

(Include city, state, and zip)

Name and address of the individual to whom the check needs to be mailed. *(The check will be mailed directly to this individual each month.)*

NAME: _____

AGENCY: _____

ADDRESS: _____

(Include city, state, and zip)

TELEPHONE: _(_____)_____ FAX NUMBER: _____

E-MAIL ADDRESS: _____

**Missouri Department of Public Safety
Financial and Administrative Guidelines**

AWARD AND ACCEPTANCE OF CONTRACT

AWARD OF CONTRACT

After completion of the review process, contract applications designated for approval are formally awarded by the Missouri Department of Public Safety in the form of the *Award of Contract* document. This award document identifies the Missouri Department of Public Safety (Administrative Agency), the Contractor, the Contract Period, amount of federal or state funds, and the Contract Number. As appropriate, Special Conditions are included which the Contractor must meet if the award is accepted. All correspondence concerning the award shall refer to the designated Contract Number shown on the *Award of Contract* document.

ACCEPTANCE OF AWARD

The *Award of Contract* constitutes a contractual agreement between the Missouri Department of Public Safety and the Contractor for use of state or federal funds in the implementation of the project covered by the award as outlined in the Application for Contract and Narrative Work Program. This contractual agreement may be terminated without further cause if the Contractor fails to affirm its acceptance of the award by signing and returning the *Award of Contract* to the Missouri Department of Public Safety **WITHIN 45 DAYS** from the date of award. No state or federal funds shall be disbursed to the Contractor until the Missouri Department of Public Safety has received the signed acceptance.

CANCELLATION CONDITIONS

If a project is not operational within **60 DAYS** of the contract starting date, the Contractor must report by letter to the Missouri Department of Public Safety the steps taken to initiate the project, the reasons for delay, and the expected starting date.

If a project is not operational within **90 DAYS** of the contract starting date, the Contractor must submit a second statement to the Missouri Department of Public Safety explaining the implementation delay. Upon receipt of the 90-day letter, the Missouri Department of Public Safety may decide to continue the contract or cancel the project.

PAYMENT AND REPORTING OF FUNDS

REPORT OF EXPENDITURES AND REQUEST FOR REIMBURSEMENT

Contractors will be required to verify, on a monthly basis, actual cash expenditures and request reimbursement for those expenditures. The *Monthly Report of Expenditures and Request for Reimbursement* is mailed to the Contractor on a monthly basis with the due date being the tenth (10th) day of each month. The *Monthly Report of Expenditures and Request for Reimbursement* is used by the Missouri Department of Public Safety to process payment sent out to the Contractor for reimbursement of expenditures.

OBLIGATED FUNDS

Funds are considered obligated by a Contractor when a legal liability to pay determinable sums for services or goods is incurred that will require payment during the same or future period. When a purchase order is issued, funds are considered obligated. All funds must be obligated by the contract period ending date. Any funds not properly obligated within the contract period will lapse and revert to the Missouri Department of Public Safety. Travel Expenses will only be allowed for events, training, and other activities held during the time period of the contract. Funds cannot be obligated for an activity that will take place outside of the contract period.

EXPENDED FUNDS

Funds are considered to be expended when payment is made. Due to the nature of this program all funds must be expended by the end of the contract period.

REPORTING REQUIREMENTS FOR REVISIONS

BUDGET REVISIONS

Formal Budget Revisions: Prior approval must be received from the Missouri Department of Public Safety, Office of the Director, for certain types of changes to the budget or project scope. These types of changes are listed below:

- a. The addition or deletion of a specific budget line item
- b. Monetary additions to the Personnel Budget Category
- c. A change in the approved budget categories in excess of 10 percent of the total award amount.
- d. A change in the scope of the project
- e. A change in or temporary absences of the project director or authorized official
- f. A change in the project site
- g. A change in the name of the agency

Timing of Formal Budget Revisions: If a budget or programmatic revision is required, the request for a change must be submitted at least 30 days prior to the proposed change taking effect and at least 60 days prior to the end of the contract. Budget revisions must be requested on the required form. Budget revisions will not be retroactive unless there are extenuating circumstances presented.

Informal Budget Revisions: Prior approval does not need to be sought from the DPS when transferring less than 10% (cumulative during the contract period) of the total grant award from one budget category to another budget category (except for the Personnel Budget – Prior approval for any monetary additions in this category is necessary).

Care must be taken to ensure supplanting does not occur if moving funds through an informal budget revision if your agency is subject to supplanting as indicated by the grant guidelines.

PROGRAM REVISIONS

Contractors must make a written request for approval from the Missouri Department of Public Safety for major program changes at least 30 days prior to the proposed change. These include changes such as:

- A change in project activities as set forth in the approved Narrative Work Program.
- A change in or the temporary absence of the project director and/or authorized official.
- A change in a project staff position.
- A change in project site.
- The addition of an item to the project budget.

PROCUREMENT POLICY

ALLOWABILITY OF COSTS

For requirements specific to *SSVF*, please refer to the *Program Description* contained in the Application Packet.

If the Contractor is uncertain as to the allowability of a cost, please contact the respective Program Office with the Missouri Department of Public Safety, Office of the Director for clarification.

PROCUREMENT OF COSTS

It should be determined that the item to be purchased is an approved budget item (approved by the Missouri Department of Public Safety and shown in the approved application), that any necessary prior approval has been obtained, that no other item owned by the Contractor is available for the purpose, and that sufficient funds are in the budget prior to purchasing an item.

All contractors are encouraged to use their own procurement regulations provided unless the Procurement Policy for the State of Missouri is more restrictive. At a minimum, the contractor must meet the following procurement standards:

- 1) All procurement transactions whether negotiated or competitively bid and without regard to dollar value shall be conducted in a manner so as to provide maximum open and free competition.
- 2) All quotations and the rationale behind the selection of a source of supply must be retained, attached to the purchase order copy, and placed in the accounting files.
- 3) Where only one bid or positive proposal is received, it is deemed to be sole source procurement. Sole source procurement on amounts over \$3,000 requires prior approval from the appropriate Missouri Department of Public Safety, Office of the Director grant program office.
- 4) Items costing less than \$3,000 may be purchased with prudence on the open market.
- 5) All purchases estimated to cost between \$3,000 but less than \$24,999, must be competitively bid, but need not be solicited by mail or advertisement.
- 6) All purchases with an estimated expenditure of \$25,000 or over shall be advertised for bids in at least two daily newspapers of general circulation in such places as are most likely to reach prospective bidders at least five days before bids for such purchases are to be opened.

CONTRACT REQUIREMENTS

When a Contractor subcontracts for work or services, the following is required:

- 1) All consultant and contractual services shall be supported by written contracts stating the services to be performed, rate of compensation and length of time over which the services will be provided which shall not exceed the length of the contract period.

- 2) A copy of all written contracts for contractual or consultant services must be forwarded to the Missouri Department of Public Safety upon their ratification.
- 3) Payments must be supported by statements outlining the services rendered and supporting the period covered.
- 4) Any contract or agreement for service of \$3,000 or more which is not entered into as a result of competitive bidding procedures (or if only one bid is received) must receive prior approval from the Missouri Department of Public Safety.
- 5) Compensation for individual consultant services is to be reasonable and consistent with that paid for similar services in the market place. Consideration will be given to compensation including fringe benefits for those individuals whose employers do not provide the same. In addition, the policy is that the maximum rate for consultants is \$450 (excluding travel and subsistence costs) for an eight-hour day. An eight-hour day may include preparation, evaluation, and travel time in addition to the time required for actual performance. A request for over \$450 a day requires prior approval and additional justification.

PROPERTY

Definitions

The following definitions apply for the purpose of these policies and procedures:

- 1) **Real Property** means land, land improvements, and appurtenances thereto, excluding movable machinery and equipment.
- 2) **Personal Property** means property of any kind except real property. It may be tangible (having physical existence) or intangible (having no physical existence, such as patents, inventions, and copyrights).
- 3) **Equipment** is tangible, nonexpendable personal property having a useful life of more than one year and an acquisition cost of \$250 or more per unit.
- 4) **Nonexpendable Personal Property** means tangible personal property having a useful life of more than one year and an acquisition cost of \$250 or more per unit.

Title

Initially, title to property acquired in whole or in part with federal funds in accordance with an approved project budget shall be vested in the Contractor, as long as said property is used for the purposes of the victim assistance project. When the property is no longer used for project purposes, the Contractor shall notify the Missouri Department of Public Safety for final disposition instructions.

Record Requirement

The Contractor will be required to maintain property management records. At a minimum, property management records maintained by the Contractor must meet the following requirements:

- 1) Records shall contain copies of the purchase order and invoice.
- 2) The records shall include an inventory control listing for nonexpendable property. The inventory control list must be reasonably current. The system may be manual or automated, centralized or decentralized. The record must contain:

- a. Item description;
 - b. Source of property;
 - c. Manufacturer's serial number and, if applicable, a control number;
 - d. Federally funded cost equity at time of acquisition;
 - e. Acquisition date and cost;
 - f. Location, use, and condition of property;
 - g. Ultimate disposition data including sale price or the method used to determine current fair market value.
- 3) A control system shall be in effect to ensure adequate safeguards to prevent loss, damage, or theft to the property. Any loss, damage, or theft of nonexpendable property shall be investigated, fully documented, and made part of the contract file.
 - 4) Adequate maintenance procedures shall be established to keep the property in good condition.

Inventory Record Retention

Records for nonexpendable property acquired with state or federal funds shall be retained for three years **after final disposition of property.**

Disposition of Personal Non-expendable Property

Contractors shall dispose of the personal non-expendable property when original or replacement equipment acquired under the award or subaward is no longer needed for the original project or program or for other activities currently or previously supported by a federal agency. Disposition of the equipment will be made as follows:

- a. Items with a current per unit fair market value of less than \$5,000 may be retained, sold, or otherwise disposed of with no further obligation to the Department of Public Safety.
- b. Items with a current per unit fair market value in excess of \$5,000 may be retained or sold and the Department of Public Safety shall have a right to an amount calculated by multiplying the current market value or proceeds from the sale by the Department of Public Safety's share of the equipment. The seller is also eligible for sale costs.
- c. In cases where a contractor fails to take appropriate disposition actions, the Department of Public Safety may direct the contractor to take other disposition actions.

Intangible Property

Copyrights – Where Department of Public Safety programs produce original books, manuals, films or other copyrightable material, the Contractor may copyright such, but the Administration reserves a royalty-free, nonexclusive and irrevocable license to reproduce, publish, translate, or otherwise use, and to authorize others to publish and use such materials.

Patents – If any discovery or invention arises or is developed in the course of or as a result of work performed in a Contractor's project, the Contractor shall refer the discovery or invention to the Missouri Department of Public Safety, Office of the Director which will determine whether or not patent protection will be sought, how any rights therein, including patent rights, will be disposed of and administered, and the necessity of other action required to protect the public interest in work supported with state funds.

ACCOUNTING SYSTEM AND FINANCIAL RECORDS

ACCOUNTING SYSTEMS

All Contractors must establish and maintain accurate financial records and an adequate accounting system to account for funds awarded to them and for the funds used as match. An acceptable and adequate accounting system is considered to:

- 1) Present and classify costs of the contract as required for budgetary and evaluation purposes;
- 2) Provide cost and property control to assure optimal use of state or federal funds;
- 3) Control funds and other resources to assure that the expenditure of funds and use of property are in compliance with any general or special conditions of the contract;
- 4) Meet the deadlines for submission of financial reporting information, as needed for control and evaluation of all contract costs.

Total Cost Budgeting and Accounting

Accounting for all contract funds shall be structured and executed on a “total program cost” basis. That is, total program costs, including state or federal funds and local matching funds, and any other sources included in the approved project budget, shall be the foundation for fiscal administration and accounting. Contract applications and financial reports require budget and cost estimates on the basis of total costs.

Commingling of Funds

Contractors are not required to physically segregate cash deposits of the awarded federal or state funds. However, the accounting systems of all contractors and subcontractors must ensure that agency funds are not commingled with funds from other state and federal sources. Each award must be accounted for separately. Contractors and subcontractors are prohibited from commingling funds on either a program-by-program basis or a project- by-project basis. Funds specifically budgeted and/or received for one project may not be used to support another project.

Contractor Responsibilities

All Contractors receiving federal funds through the Missouri Department of Public Safety are responsible for the management and fiscal control of all funds. Responsibilities include the accounting of receipts and expenditures, the maintaining of adequate financial records and the refunding of expenditures disallowed by audits.

The Contractor is responsible for all aspects of the contract including proper accounting and financial record keeping.

These responsibilities include:

- 1) Reviewing Financial Operations;
- 2) Recording Financial Activities;
- 3) Budgeting and Budget Review;
- 4) Accounting for Non-State Contributions and Non-federal contributions;
- 5) Audit Requirements;
- 6) Reporting Irregularities to the MO Department of Public Safety upon their discovery.

Record Retention

Records of the Contractor, including books of original entry, source documents, supporting accounting transactions, the general ledger, subsidiary ledgers, personnel and payroll records, cancelled checks, and related documents and records are to be retained for a period of three years pursuant to the following:

- 1) The retention period starts from the date of submission of the final Report of Expenditures or from the submission of the audit for the contract period covered.
- 2) Personnel and payroll records shall include the time and attendance reports for all individuals reimbursed under a contract or subcontract, whether they are employed full-time or part-time.
- 3) Records must be retained beyond a three-year period if an audit is in progress and/or the findings of a completed audit have not been resolved. If an audit is completed and the findings are resolved prior to the three-year period, records will be retained until the end of the three-year period.
- 4) If state or local law requires a longer period of retention, access to the records will be allowed for purposes of audit.
- 5) The financial records must be kept in an orderly manner and be available for audit purposes to the Missouri Department of Public Safety.
- 6) Contractors are responsible for protecting their records against fire, theft, or other possible damages.

MONITORING

MONITORING REQUIREMENTS

The Missouri Department of Public Safety, in accordance with State Guidelines, may monitor contracts awarded through this program. Monitoring will be conducted through on-site visits or through desk monitoring as deemed necessary by the program manager. Applicant agencies may be monitored annually.

In certain situations, a contract may be monitored either on-site or through desk monitoring on a regular and frequent basis to assure compliance. These situations include, but are not limited to:

- A report to the Missouri Department of Public Safety, Office of the Director of the mishandling of grant funds
- A report of the use of grant funds for ineligible activities
- Discrepancies noted on the Monthly Report Of Expenditures and/or Detail Sheet
- A change in the managing staff within a contracting agency
- Financial and/or programmatic issues of noncompliance found during a regularly scheduled monitoring visit or desk monitoring

MONITORING PURPOSE

Monitoring of all programs funded through the Missouri Department of Public Safety is designed to provide assistance to the Contractor both from a technical and programmatic standpoint, as well as, to provide the Missouri Department of Public Safety with the necessary information to ensure the Contractor's compliance with state and federal guidelines. This monitoring report will also be used as a tool for determining the progress of the project in achieving its outlined goals and objectives

MONITORING INFORMATION REQUIRED

The following information and records will be required and reviewed at the time the monitoring report is conducted:

- 1) A brief summary of project activities to measure the performance of the project to date;
- 2) A list of project expenditures including both the local match and federal funds spent along with copies of invoices for equipment purchased, receipts associated with meal expenses, travel / conference expenses and mileage logs;
- 3) Copies of bid records to verify compliance with local and/or state procurement policies;
- 4) An inventory listing including items with a unit cost of \$250 or more purchased under the contract;
- 5) Copies of time records for any personnel funded by the contract or used as local match under the contract (a suggested format is included in the **APPENDIX**);
- 6) A copy of any written operational procedures developed for the project; and
- 7) Other information pertinent to the state or federally funded project.

GENERAL CONTRACT REQUIREMENTS

UNALLOWABLE COSTS

The following is a list of costs generally unallowable for all projects funded through the Missouri Department of Public Safety.

1. Real Property Acquisition
2. Honoraria
3. Indirect costs of conferences, symposia, and workshops including entertainment, sports, visas, passport charges, tips, bar charges, beverages, personal telephone calls, or laundry charges
4. Bonuses or commissions
5. Lobbying
6. Cost of fundraising
7. Military type equipment

PRINTING AND PUBLICITY

Contractors are encouraged to make the results and accomplishments of their activities available to the public through printed publication or media release.

All printed materials, however, must include an acknowledgement of the funding source similar to the following:

“This project was supported by funding made available through the State Services to Victims Fund administered by the Missouri Department of Public Safety, Office of the Director.”

TERMINATION OF CONTRACTS

In the event that the Missouri Department of Public Safety determines that a Contractor is operating in a manner inconsistent with the provisions of the application or is failing to comply with the applicable regulations, the Missouri Department of Public Safety may permanently or temporarily terminate the contract. Should this occur, the Contractor has the right to an appeal hearing. In the event a contract is permanently terminated, the Missouri Department of Public Safety may take action as deemed appropriate to recover any portion of the contract funds remaining or an amount equal to the portion of the contract funds wrongfully used.

CRIMINAL PENALTIES

Whoever embezzles, willfully misapplies, steals, or obtains by fraud any funds, assets, or property, which is the subject of a grant or contract or other form of assistance, whether received directly or indirectly from the Missouri Department of Public Safety, shall be subject to prosecution.

Appendixes

Change of Information Form

VOCA Contract No. _____	NCAP Contract No. _____	Title II Contract No. _____
STOP Contract No. _____	CLAP Contract No. _____	Title V Contract No. _____
SSVF Contract No. _____	MCLUP Contract No. _____	Challenge Contract No. _____
RSAT Contract No. _____	LLEBG Contract No. _____	JAIBG Contract No. _____
	LGSD Contract No. _____	

Please list any change of information from that included in your approved contract.

Agency Name: _____

Authorized Official: _____

Project Director: _____

Address: _____

Telephone Number: _____

E-Mail Address: _____

Other Changes: _____
(Please specify change. _____
Include changes in per- _____
sonnel, board members, _____
job descriptions, organi- _____
zational charts, etc. Please _____
attach copies.) _____

****PLEASE NOTE****

The Department of Public Safety must approve certain changes in the budget and requests for such changes must be submitted on a Request to Revise the Budget form, which is included in your application packet.

Agency Name: _____

Signature: _____ Date: _____
(Authorized Official)

Return to: Missouri Department of Public Safety, P.O. Box 749, Jefferson City, MO 65102-0749.





MISSOURI DEPARTMENT OF PUBLIC SAFETY
OFFICE OF THE DIRECTOR
REQUEST TO REVISE THE BUDGET

P.O. Box 749
Jefferson City, MO 65102
Telephone: 573-751-4905
FAX: 573-751-5399



Contractor Name

Project Title

Contract Number

COST CATEGORY	CURRENT BUDGET		REQUESTED REVISED BUDGET		NET CHANGE (+ OR -)
PERSONNEL <i>(Plus Fringes and Overtime)</i>					
VOLUNTEER TIME					
TRAVEL					
EQUIPMENT					
SUPPLIES/OPERATIONS					
CONTRACTUAL					
RENOVATION/CONSTRUCTION					
TOTAL PROJECT COSTS		100%		100%	\$0.00
TOTAL FEDERAL/STATE SHARE		%		%	\$0.00
TOTAL LOCAL MATCH SHARE		%		%	\$0.00

NARRATIVE JUSTIFICATION – Briefly explain the requested change. Explain why a reduction in some categories will not be detrimental to the project and an increase in others will further the objectives of the project. **Attach copies of each changed budget detail sheet.**

PREPARED BY

Signature

Date

Telephone Number:

E-Mail Address:

Fax Number:

APPROVED BY

Authorized Official Signature

Date

INSTRUCTIONS FOR REQUEST TO REVISE THE BUDGET

Contractors must make a written request for approval from the Missouri Department of Public Safety for program changes at least 30 days prior to the change and at least 60 days prior to the end of the contract period. Please see the appropriate grant program financial and administrative guidelines for contracts for further information regarding changes that require prior approval from the Department of Public Safety or contact your respective program specialist or representative.

Enter the **Contract Name** as it appears on the current Award of Contract document.

Enter the **Project Title** as it appears on the current Award of Contract document.

Enter the **Contract Number** as it appears on the current Award of Contract document.

Under the **Current Budget** column, include the current budget as approved by the Department of Public Safety. This budget will either be outlined on the Application for Funding form or on a Contract Adjustment Notice previously authorized by the Department of Public Safety.

Under the **Requested Revised Budget** column, include the new budget for which approval is being sought. Keep in mind that expenditures up to the date of the requested change in the budget must be included in this revised budget section. Make sure that the totals reflect the appropriate local match share if required.

*Under the **Net Change (+ OR -)** column, enter the difference between the current budget and the requested revised budget. For example, if the current personnel budget is \$20,000 and the requested revised budget is \$25,000, enter +\$5,000 in the Net Change column.

Attach new budget pages for any budget category for which a revision is requested. The new budget page must include expenditures up to the date of the requested change in the budget along with the requested revisions.

In the Narrative Justification section, provide a brief explanation regarding the requested change. Include the rationale for making this request. Be sure to explain why a reduction in some categories will not be detrimental to the project and an increase in others will further the objectives of the project. Be as specific as possible.

Obtain proper signatures and include the telephone number, e-mail address, and fax number for the person preparing this request.

Please contact your respective program specialist or representative if you have any questions regarding this budget revision process.

DPS GRANTS ADMINISTRATION
PAY PERIOD AND ATTENDANCE REPORT
(Please complete both sides of activity report and attach to this form)

NAME OF SUBGRANTEE _____ CONTRACT # _____

NAME OF EMPLOYEE _____ MONTH/YEAR _____

TITLE & NATURE OF WORK PERFORMED _____

Please fill in the starting date and ending date of the pay period by month and day (example 12/25) in the appropriate box.
TIME SHEET DATES MUST CORRESPOND DIRECTLY WITH THE AGENCY'S INTERNAL PAY PERIOD.

	Start Date																End Date
Day of Month																	Subtotals
Total Hours Worked																	
Total Hours Worked on Project																	

Day of Month																	Subtotals
Total Hours Worked																	
Total Hours Worked on Project																	

Total Hours Worked on Project	Divided By	Total Hours Worked This Month	Equals =	Percent of Time on Project	TIMES X	Total Salary/ Benefits for Pay Period(s)	Equals =	Amount Charged to Grant

I CERTIFY THAT THE ABOVE IS A TRUE AND CORRECT STATEMENT.

Employee

Date

Supervisor

Date

DEFINITIONS FOR SERVICES PROVIDED

Crisis Counseling refers to in-person or telephone crisis intervention, emotional support and guidance and counseling provided by advocates, counselors, mental health professionals or peers. Such counseling may occur at the scene of the crime, immediately after a crime, or be provided on an ongoing basis.

Follow-up refers to in-person contacts, telephone contacts, and written communications with victims to offer emotional support, provide empathetic listening, check on a victim's progress, etc.

Therapy/Professional Counseling refers to intensive professional psychological/psychiatric treatment for individuals, couples, and family members related to counseling to provide emotional support in crisis arising from the occurrence of crime. This includes the evaluation of mental health needs, as well as the actual delivery of psychotherapy.

Group Treatment refers to the coordination and provision of supportive group activities and includes self-help, peer, social support, etc.

Shelter/Safe House refers to providing short-term and long-term housing and related support services to victims and families following victimization. (*This does not include referral for such housing.*)

Information and Referral (in-person) refers to in-person contacts with victims during which time services and available support are identified.

Criminal Justice Support/Advocacy refers to support, assistance and advocacy provided to victims at any stage of the criminal justice process, including post-sentencing services and support.

Emergency Financial Assistance refers to cash outlays for transportation, food, clothing, emergency housing, etc.

Emergency Legal Advocacy refers to filing temporary restraining orders and other protective orders, but **does not** include criminal prosecution or the employment of attorneys for non-emergency purposes, such as custody disputes, civil suits, etc.

Assistance in Filing Compensation Claims includes making victims aware of the availability of crime victim compensation, assisting the victim in completing the required forms, gathering the needed documentation, etc. It may also include follow-up contact with the victim compensation agency on behalf of the victim.

Personal Advocacy refers to assisting victims in securing rights, remedies, and services from other agencies; locating emergency financial assistance, intervening with employers, creditors, and others on behalf of the victim; assisting in filing for losses covered by public and private insurance programs including workman's compensation, unemployment benefits, welfare, etc; accompanying the victim to the hospital; etc.

Telephone Contact refers to telephone contacts with victims during which time services and available support are identified. This does not include calls during which counseling is the primary function of the telephone call, nor does it include crisis hotline calls.

Crisis Hotline Calls refers to the number of crisis hotline calls logged.

Other refers to other allowable grant services and activities

For unallowable activities and services, provide a description of the activity/service performed and the time (hours) spent on that activity. Please round partial hours (up or down), and report time in increments of whole hours. THE “TOTAL UNALLOWABLE HOURS WORKED ON PROJECT” SHOULD BE ADDED TO THE “TOTAL HOURS WORKED ON PROJECT” TO COMPUTE THE TOTAL HOURS WORKED PER DAY. THE TOTAL HOURS WORKED PER DAY SHOULD BE RECORDED ON THE PAY PERIOD AND ATTENDANCE REPORT IN THE “TOTAL HOURS WORKED” ROW.

[illegible]



SSVF ANNUAL PERFORMANCE REPORT

Contractor: _____
Contact Person: _____
Address: _____

E-mail Address: _____
Telephone Number: _____
Fax Number: _____
Contract Number: _____

Reporting Period: *July 1 – June 30*

Report Due Date: *July 15*

A. Indicate the number of victims served by your SSVF funded project during this project period. *Each victim should be counted only once, i.e., a victim of a series of spouse abuse assaults should be counted more than once only as a result of separate and unrelated crimes.*

_____ Child Physical Abuse	_____ Adults Molested as Children
_____ Child Sexual Abuse	_____ Survivors of Homicide Victims
_____ DUI/DWI Crashes	_____ Robbery
_____ Domestic Violence	_____ Assault
_____ Women _____ Children	
_____ Adult Sexual Assault	_____ Other (specify) _____
_____ Elder Abuse	
_____ Total number of victims served by this SSVF funded project (<i>Do not include total number of hotline calls.</i>)	
_____ Total number of hotline calls logged by this SSVF funded project	

B. Indicate the number of victims served in the following categories.

_____ Child _____ Elderly _____ Disabled/Handicapped _____ Native Americans _____ Minorities

C. Indicate the number of victims who received the following services through this SSVF funded project. *Please see the instructions for definitions of each service.*

_____ Crisis Counseling (<i>In Person</i>)	_____ Follow-up	_____ Therapy/Prof. Counseling
_____ Group Treatment/Support	_____ Shelter/Safe House	_____ Information/Referral (<i>In Person</i>)
_____ Criminal Justice Support/Advocacy	_____ Emergency Financial Assistance	_____ Emergency Legal Advocacy
_____ Assistance Filing Compensation Claims	_____ Personal Advocacy	_____ Telephone Contact Information/Referral
_____ Crisis Hotline Calls	_____ Other (specify) _____	

D. If this is a training project, please provide the following information *(attach additional sheets if necessary):*

The number of training seminars held during the course of the contract period: _____

Presenter(s)	Topic(s)	Date(s) of the Training	Duration <i>(hours, days, etc.)</i>	Audience <i>(types of professionals in attendance)</i>	Number in Attendance

Attach the written curriculum or agenda for each seminar.

Attach any pre- and post-testing results.

Attach evaluations completed by attendees with a summary of the results.

E. Describe efforts to promote coordinated efforts within the community to aid crime victims. *(Attach additional sheets if necessary.)*

F. Describe any notable activities conducted to improve the delivery of victim services. These activities do not need to be related specifically to the SSVF funded project. Include any needs assessments, program evaluations, training efforts, etc.

G. Include and/or attach anecdotal information and individual case histories illustrating how SSVF funds have been used to assist crime victims. *(Letters from crime victims are helpful.)*

H. Identify any emerging issues or notable trends impacting crime victim services in your area.

Project Director

Authorized Official

SSVF ANNUAL PERFORMANCE REPORT

Instructions – Definitions

Each agency receiving SSVF victim assistance funds is required to submit a SSVF Annual Performance Report on the uses and affects these grant funds have had on services to crime victims. This report must be submitted by July 15, to the Missouri Department of Public Safety, P.O. Box 749, Jefferson City, MO 65102.

A SSVF project refers to activities and services supported by SSVF funds. Except where otherwise indicated, the information in the SSVF Annual Performance Report must be based solely on SSVF projects, not the entire agency nor on non-SSVF supported victim activities and services. A worksheet on which victim service statistics may be recorded throughout the project period is attached for your convenience.

A. Provide the number of victims served during the reporting period. Indicate the number of victims served by type of victimization. If a victim was the subject of more than one type of crime, identify under each category of victimization.

NOTE: The data in this section is based upon the number of victims served by SSVF projects during the reporting period. In this section, each victim should be counted only once, e.g., a victim of a series of spouse abuse assaults, for example, should be counted once. A person may be counted more than once only as a result of entirely separate and unrelated crimes.

B. Provide the number of victims served by the categories identified. If a victim falls under more than one category, identify under each applicable category, i.e., a child victim who is also disabled would be reported under both the "child" and "disabled" categories; an elderly victim who is also a minority would be counted once under the "elderly" and once under the "minority" category, etc.

C. Provide the number of victims receiving each type of service.

Crisis Counseling refers to in-person crisis intervention, emotional support and guidance and counseling provided by advocates, counselors, mental health professionals or peers. Such counseling may occur at the scene of the crime, immediately after a crime, or be provided on an ongoing basis.

Followup refers to in-person contacts, telephone contacts, and written communications with victims to offer emotional support, provide empathetic listening, check on a victim's progress, etc.

Therapy/Professional Counseling refers to intensive professional psychological/psychiatric treatment for individuals, couples, and family members related to counseling to provide emotional support in crisis arising from the occurrence of crime. This includes the evaluation of mental health needs, as well as the actual delivery of psychotherapy.

Group Treatment refers to the coordination and provision of supportive group activities and includes self-help, peer, social support, etc.

Shelter/Safe House refers to offering short-term and long-term housing and related support services to victims and families following victimization.

Information and Referral (in-person) refers to in-person contacts with victims during which time services and available support are identified.

Criminal Justice Support/Advocacy refers to support, assistance and advocacy provided to victims at any stage of the criminal justice process, to include post-sentencing services and support.

Emergency Financial Assistance refers to cash outlays for transportation, food, clothing, emergency housing, etc.

Emergency Legal Advocacy refers to filing temporary restraining orders, injunctions, and other protective orders, elder abuse petitions, and child abuse petitions but **does not** include criminal prosecution or the employment of attorneys for non-emergency purposes, such as custody disputes, civil suits, etc.

Assistance in Filing Compensation Claims includes making victims aware of the availability of crime victim compensation, assisting the victim in completing the required forms, gathering the needed documentation, etc. It may also include followup contact with the victim compensation agency on behalf of the victim.

Personal Advocacy refers to assisting victims in securing rights, remedies, and services from other agencies; locating emergency financial assistance, intervening with employers, creditors, and others on behalf of the victim; assisting in filing for losses covered by public and private insurance programs including workman's compensation, unemployment benefits, welfare, etc; accompanying the victim to the hospital; etc.

Telephone Contact refers to contacts with victims during which time services and available support are identified. This does not include calls during which counseling is the primary function of the telephone call.

Crisis Hotline Calls refers to the number of crisis hotline calls logged.

Other refers to other SSVF allowable services and activities not listed.

D. through H. - Please answer all questions noted in these sections. The Department of Public Safety will use this information to report to the legislature and justify the need for ongoing support.

Please Note: This Annual Performance Report must be received by **July 15th** during the year immediately following the end of the contract period for the referenced contract. Failure to submit this Annual Performance Report by **July 15th** could result in the termination of any current funding awarded to this contractor.